

2002-2003 DEPARTMENTAL REPORT ON IMPLEMENTATION OF THE GUIDING PRINCIPLES

COUNSELING AND HEALTH SERVICES

Introduction

Both the Counseling Center and the Health Center provide counseling and clinical services, along with outreach, training, research and testing programs. It seems appropriate to lead off this report with those numbers. All of these programs and services are designed to remove barriers to learning, confront critical issues that impede success and teach life skills and fit well under Goal 1—Student Learning (providing students learning opportunities); under Goal 2—A Civil, Positive and Diverse Learning Community (minimizing negative influences that hinder student success); and, Goal 3—Enrollment (advancing the university's recruitment and retention plans).

During the first nine months of the current year, the Counseling Center provided 4,202 hours of individual and group, personal/social counseling services to approximately 1,000 students and the Health Center responded to 22,290 clinical visits. The Health Center also offered services through a pharmacy, physical therapy facility and women's center. The Counseling Center also staffed a 24-hour telephone, emergency service. The Center also responded to 170 calls through that vehicle, combined with crisis/emergency interventions during regular working hours..

Staff responded to 182 requests through the on-line vehicle, "Concerned Charlie"; did 125 emergency intakes; provided 242 psychiatric consultations and facilitated around 8 hospitalizations for mental health reasons.

Goal 1: Student Learning

1. The Counseling Center worked with academic departments through assigning staff members as liaisons for consultation to most academic departments. The Center also did placement testing for the math department, which began during summer orientation of 2002. Furthermore, through the Lilly II Grant, the staff presented in 45 classrooms, doubling the numbers from last year. In addition to the Lilly II programs, Center staff also did 614 other outreach programs, serving 21,342 participants, in classrooms, residence halls and a variety of other areas. Additionally, the Health Education area did 82 classroom and residence hall presentations. Among the most popular outreach programming areas were the following: 20 programs were done in the area of Career Development; 38 in the area of Diversity Enrichment; 36 in Eating Disorders; 26 in Sexual Assault Awareness; 99 in the area of stress management and reduction (jointly with Lilly II); and 23 in Learning Styles.
2. During this year, the Testing Division of the Counseling Center successfully implemented "Computer Based Testing." The effort included winning the contract, remodeling the facility, training and certifying technicians and implementing the program. The program has been well received during the first month of its operation and will be having a formal opening later in the spring.

3. The Counseling Center introduced career planning services by providing career assessment and exploration activities, including distributing brochures at orientation, offering career exploration groups throughout the year and collaborating with the Career Center to offer a special program through the colleges. The Center also did 28 outreach programs, in residence halls and classes, in the area of career exploration and the Myers-Briggs.

The most significant new program in the career area was submitting a proposal and receiving a contract to do an "I-See-TV" pilot project. The pilot will offer career counseling and assessment to selected high school students, who have been accepted for admission to BSU, in the hope that it will be valuable to them, as well as increase the numbers who actually come here. The pilot will be a prologue to a much larger and broader program that will run during the early months of 1994.

4. The Counseling Center assessed programs and services through the use of two measures: The "Outcome Questionnaire 45" and "Client Satisfaction Questionnaires." We administer the OQ 45 at intake, at the end of 4 weeks and again at termination. Client Satisfaction is measured during the 7th and 14th weeks of each semester. An Outreach Evaluation is also used for every program presented, including orientation programs. The Health Center developed a Patient Satisfaction Questionnaire this year, for the first time in its history.
5. The Counseling Center advocated for minority students by offering support groups for LBGSA and by taking leadership in groups like the Diversity Policies Institute in Academic Affairs.

The Center also became much more active in programming for international students. A staff psychologist was assigned as a special point person for that area.

6. Both the Counseling and Health Centers mentored students through their training programs. The Counseling Center has an APA accredited internship program, an MA Counselor Certification internship and an MA Traineeship and a Field Experience for doctoral students in psychology. The Health Center mentored graduate students who did screenings through the Lilly grant. The Health Center also worked with nursing students to develop databases for use with the "I-See-TV" program.

Goal 2: Community

1. Counseling and Health programs and services minimized negative influences that hinder success through providing both clinical services and aggressive outreach programming. As stated in the Introduction, during the first nine months of the year, the Health Center responded to 22,297 clinical visits from Ball State students and over 300 students from the Indiana Academy. The Counseling Center provided individual and group counseling services to hundreds of students. The Counseling Center also provided psychiatric consultation and 24 hour crisis/emergency services. The Center also sponsored two special weeks of activities: "Sexual Assault Awareness Week" and "Eating Disorders Awareness Week."

Through the Lilly II vehicle, “Stress-Free Zones” were offered a minimum of three times a week and received notice in Newsweek magazine. Alumni magazine also carried a feature article about the program. Activities also included active participation in a community task force.

2. We discouraged substance abuse in many ways. First, the Counseling Center offered groups and provided individual counseling services, as well as through conducting 19 outreach programs for fraternities, residence life, athletes and other groups. We conducted extensive programming through the Lilly II Grant, through our “Reconnecting to Community” component. The Center director served as a project director and coordinated the expenditures of \$84,000 per year—of which almost ½ was spent for combating alcohol abuse. We planned and implemented programming “from a public health perspective,” which included four components: Social Norming, Judicial Reform, Alternative Activities and Community Alliances.
3. We supported diversity through an extensive outreach effort by the Diversity Team, which did 40 programs, with 1,089 participants, for groups throughout the campus. The Center staff also conducted support groups for both men and women of color—both semesters. We also did it by recruiting both minority staff members and interns. Jay Zimmerman also served on the Diversity Policies Council.
4. We participated in the judicial process that handles grievances, mediation and conflict management by serving as mediators when time allows. We have 3 staff that are certified mediators.
5. We communicated and collaborated with community agents in a variety of capacities and programs. Seven psychologists, one physician and six nurses have clinical privileges at Ball Memorial Hospital. One of our psychologists, Lee Van Donselaar, is a principal participant in the emerging Sports Psychology Center and Kent Bullis sits in on staffings, when time allows, with athletics and the Sports Medicine program. The director works closely with Primary Care Physician’s Network, of Cardinal Health System, in the clinical management of the Health Center. Staff worked with the larger community in planning and implementing both Sexual Assault Awareness Week and Eating Disorders Awareness Week. The Center and Health Education worked with NIMH alcohol awareness and screening programs, and Health Education worked with the agency in surveying student health issues.

Goal 3: Enrollment

- 1-2. The Counseling Center advances the university recruitment and retention plans through almost everything we do, including counseling and clinical health services, outreach, training and research. However, more specifically, our staff works with both parent and student groups in freshman orientation programming, with programs geared to help with transitions. Staff also does 6 or more programs for students in danger of disqualification, in collaboration with the Bursar’s office and help, when asked, with minority recruitment. In addition, a part of our Lilly II Grant targets emotional problems, especially depression,

anxiety and stress, as reasons good students drop out of school and don't persevere to graduation. This year we initiated a program that includes setting-up "Stress Free Zones" in high traffic classroom buildings; developed a Web page that synthesizes on-line self-help resources and screenings in the Health Center and classroom presentations. 202 students were screened in the Health Center and 46 were counseled there about their feelings and resources that were available to them. In addition to these general programs and those done as a part of the Lilly Grant, the Counseling Center advanced recruitment and retention through its Testing Programs. The testing office administered the ACT to 11 students; CLEP to 22; SAT to 280; MAT to 9; GRE to 49; ESL to 31; NTE Specialty to 595; PPST to 782 and Career Testing to 402 (Strong, Campbell and MBTI). The groundwork was also laid this year for BSU to become a national Computer-Based Testing Center, starting in the fall of 2003.

A major project to assist with the "Enrollment Plan" was in the proposal and receipt of a contract and license to conduct a "pilot" career counseling intervention via "I-See-TV" with high school students who have been accepted for admission. The goal is to increase the yield from this group by a significant percentage or number. The full scale project will be implemented in January of 1994.

Goal 4: Staff

1. Counseling and Health improved services by ongoing evaluation and planning. The Health Center developed the first instrument to measure Patient Satisfaction in its history. The Counseling Center uses both the OQ 45 (an outcome measure) and a Client Satisfaction Questionnaire to measure counseling services. In addition, an Outreach Questionnaire is used to evaluate all outreach activities and evaluations are used to measure training variables as well. The OQ 45 is administered to each client at intake and at two other points in service and satisfaction measures are obtained twice each semester.
2. Staff worked across departmental lines and participated with them in collaborative efforts in several ways: The Alcohol Abuse part of the Lilly II Grant involved a team approach that included the office of the Dean of Students, Student Life, Residence Life and citizens of the larger community.
3. Staff also worked with departments through staff liaisons that are assigned to almost all of them and served as consultants and conduits for referrals.
4. Lee Van Donselaar is a member of the team that is developing the Center for Sports Psychology, along with the School of Physical Education and the Athletics Department.
5. Staff have received the following awards and/or held the following professional offices and/or positions: Jay Zimmerman served on the Board of Directors of AACTA, as Chair of the ACCTA awards committee; as manager of the ACTA clearing house for internships and as an APA site visitor. Patsy Donn served as a site visitor for IACS and APA. Ellen Mauer served as Chair of Medical Associates at Ball Hospital and Co-Chair of the Eating Disorders Task Force. Both Gina Zanardelli and Robyn Geelhoed presented papers at the national

conference of the American Psychological Association. June Payne and Kim Gorman presented outcome data from the "OQ 45" at the spring program, "Spotlight on Research."

Goal 5: Planning and Evaluation

1. The ways in which Counseling Center uses assessment evidence are numerous and historic. Client Satisfaction for counseling services has been used for at least 15 years and continues through the present. Last year satisfaction was measured twice each semester. And, four years ago the center was one of a consortium of universities that developed normative data for an instrument called the OQ 45, which measures outcomes. In prior years it was used at Intake to help in identifying severity and making appropriate dispositions. During the current year, it was also used as a post-measure for the first time, being administered at the end of the 4th session and at termination. The Center also evaluates every outreach program, employing a custom designed client satisfaction type questionnaire. And, finally, all interns and trainees evaluate their supervisors on an ongoing basis, employing a questionnaire, and the supervisors do likewise. The Health Center developed its first patient satisfaction questionnaire, in its history, during this past year, and Health Education programs were also evaluated, utilizing the Outreach Questionnaire.

General

The departmental accomplishments that we are most proud of include the following:

1. Launching computer based testing during the spring semester of 1993 was a major accomplishment. During this current year, the facility was remodeled; training and certification was done by ETS and the program got underway. There has already been a large number of tests administered. It will enable students from throughout East Central Indiana to obtain service much closer to home. Prior to our receiving certification, students were required to travel to the south side of Indianapolis and wait for a month or so to take the GRE.
2. We are also very proud of the progress that continues to be made in bringing the Counseling and Health Centers together in collaboration, cooperation and communication. The units are now working together, making referrals to each other, and doing in-service training and planning together. Progress has also been significant in terms of having the Health Center become more integral to the university community.
3. Additionally, we are very proud of the work that was done in conjunction with the Lilly II Grant, in the areas of combating alcohol abuse, depression, anxiety and stress. And finally, we were proud and relieved that the results of the OQ 45 did indicate that clients who received counseling services did improve in the areas of concern.
4. One of our "highest profile" accomplishments during this year has been the launching of an "after hours" consultation, education and referral service in the Health Center, using "I-See-TV" technology. This has brought great recognition to the HC, and promises to usher in an innovative vehicle for serving students.

5. The Health Center continued to use its custom designed “patient evaluation” questionnaire during this year, and we were able to weave the results into the planning process, as well as to restructuring the contract with PCPN.
6. We updated and modified the contract with PCPN to more accurately reflect current policies and practices.
7. The Counseling Center received a contract and license to employ “I-See-TV” technology in a career counseling pilot program in May and June, as a precursor to a much broader and larger project of the same kind in 1994. It will be done in collaboration with the Office of Admissions.
8. The Lilly II program to address depression, anxiety and stress, as barriers to retention and graduation, expanded and further developed. The team has conducted, during the first 9 months of the year, 44 Stress Free Zones during 86 hours, with 1,115 students participating. The team also did 14 programs in residence halls, 1 for the library, 5 for athletics, 6 for Teachers College, 17 in the Atrium and 1 for UniversityCity.
9. The Health Education area collaborated with the Institute for Wellness in planning and programming related to a \$4,000 grant from the “Tobacco Free Coalition of Delaware County. The area also offered ongoing “Smoking Cessation” classes.
10. The Health Education area participated in the “National Probability Sample” with Southern Illinois University in a survey of drug and alcohol use.

**END OF THE YEAR DEPARTMENTAL REPORTS
STUDENT AFFAIRS AND ENROLLMENT MANAGEMENT (SAEM)
2003-2004**

Directions

End of the year reporting for SAEM departmental activities consists of the Departmental Report and Evaluation and Assessment Report Summaries.

- **Departmental Report.** All SAEM directors prepare an annual report of departmental accomplishments. These reports are combined into one divisional report that is sent to the university's Strategic Plan Implementation and Assessment Team.
- **Evaluation and Assessment Report Summaries.** All SAEM directors forward report summaries of evaluation and assessments conducted during the previous year. These reports are used to assess divisional planning, evaluation, and assessment initiatives.

Reports are for the 2003 summer semester, 2003 fall semester, and the 2004 spring semester.

Directions for the Departmental Report

Complete the 2003-2004 departmental report (below). For reporting purposes the goals and objectives in the *Guiding Principles* have been aligned with the goals and objectives in the university's *Strategic Plan*. Answer only those questions that your department addressed this past year – do not feel compelled to answer every question. Highlight the accomplishments of your department. When possible use quantitative (numeric) or qualitative (descriptive) data, or describe programs/services to answer the question. Save your report as a Word document. Return it as an attachment to an e-mail message to Roger Wessel (rwessel@bsu.edu) by May 19, 2004. (Please note – this date is two weeks earlier than previously listed to accommodate a request by Acting President Pitts.) A copy of this report should also be sent to your associate vice president/dean.

Directions for Evaluation and Assessment Report Summaries

Prepare report summaries for all 2003-2004 evaluations and assessments conducted as outlined on your departmental evaluation and assessment schedule. Forward summaries (either as an attachment to an e-mail message or by hard copy) to Roger Wessel by May 31, 2004.

COUNSELING AND HEALTH SERVICES, 2003-2004 DEPARTMENTAL REPORT

Introduction

Counseling and Health Services includes the sub-units of the Counseling Center, Health Center, and Health Education. The National Testing Program is a sub-unit of the Counseling Center. Although primarily serving Ball State University students, Counseling and Health Services provides the university community including faculty/staff, with clinical services that include both medical and psychological interventions, educational and preventative outreach programs and information, testing programs, pre-professional training for BSU graduate students, and nationally competitive APA pre-doctoral internship level training. We continue to contribute to the overall mission of Student Affairs and Enrollment Management (SAEM) by helping students succeed in college by removing barriers to learning by: confronting critical issues and problems areas that impede success; by responding to crises and traumas; by promoting healthy and productive living; and by facilitating the learning of life skills.

The annual statistics for Counseling and Health Services continue to be reflective of another active and productive year. By way of introduction and to illustrate a few of the statistical highlights for the past year, the Counseling Center provided 5889 clinical contact hours to BSU students between 5/1/03 and 4/30/04. Over 1200 clients have been seen in individual therapy with a total of 1086 new intakes during this time period. This figure represented roughly an 8.6% increase in new intakes compared to last year. Also, the Counseling Center continued to provide 24-hour crisis/emergency coverage and responded to 206 crisis/emergency contacts representing a 21% increase from the previous year. We also realized a 27% increase in the number of psychiatric consultations/visits that totaled 309 during 2003-04.

Counseling and Health Services staff members offered 912 outreach/educational programs in classrooms, residence halls, student organizations, and academic departments. Programming was provided for a total of 27,020 participants during 1130 contact hours.

The Health Education Alcohol Coordinator provided 334 individual clinical consultations to students who were dealing with substance abuse issues. Further, Health Education provided 79 outreach programs and reached 3137 students. Other highlights for Health Education included free and anonymous HIV testing for 129 students, and free condoms for 2263 students.

The Health Center provided 24,270 clinical visits, an 8.8% increase from 22,290 in 2003. Also, the Health Center pharmacy reported 19,111 pharmacy contacts during this time period.

Although the statistics do not represent a complete year, the Counseling Center National Testing Programs has provided over 2082 computer based test administrations, 1776 national paper/pencil test administrations, 493 psychodiagnostic/career/vocational test administrations, and 468 math placement examinations.

Ball State University Goal 1 – Learning

Ball State University will enhance excellence in undergraduate and graduate learning.

1. Describe how your department provided students learning opportunities and facilitated student success. Counseling and Health Services continued to contribute to student success by providing learning opportunities both in and outside the classroom. Further, staff members from all areas of Counseling and Health contributed to the overall productivity by providing learning opportunities for students:

- As a means of improving service to students, members of the Counseling Center staff were assigned as liaisons to work with academic departments by providing consultations to faculty members.
- Several Counseling Center staff members served as adjunct faculty in the Department of Counseling Psychology and Guidance and taught graduate level classes.
- All areas of Counseling and Health Services provided educational materials available to assist students.
- The Counseling Center maintained a Resource Room that provided self-help material and other resource information made available to students.
- Counseling Center staff responded to 162 student questions through the on-line “Concerned Charlie” format.
- Testing Programs provided 468 Mathematic Department placement tests.
- The Lilly II project allowed for greater visibility outreach programs of stress/depression and alcohol.
- Counseling and Health provided the following academic and classroom presentations: Academic Progress Sessions (8); Alcohol/Drug including court offenders, National Collegiate Alcohol Awareness, and Social Norming (116); Career Exploration (24); Counseling Center Services (22); Diversity and GLBT (54); Eating Disorders (63); Myers Briggs Type Indicator (22); Sexual Assault (27); and Stress Management and Test Anxiety (175).
- All units of Counseling and Health Services maintained websites. Health Education reported 69,151 hits on its website.

2. Describe how your department advocated for and was responsive to students distinguished from traditional or majority students. Counseling and Health Services continued to be a strong advocate for disabled students, international students, non-traditional students, and students of color. We affirmed the philosophy that diversity should not be a concept that is “added on” to programming for the majority; however, we strived to mainstream and project an appreciation and integration of diversity into all aspect of service. During the 2003-04 year, services were provided and/or implemented as follows:

- “Men of Color Forum” was provided both Fall and Spring Semesters at the Multicultural Center.
- Non-Traditional Women’s Group was offered in the Counseling Center both semesters.
- Medical services continued to be provided through the Women’s Center and made 2812 patient contacts.
- An international student needs assessment was designed, initiated and implemented.
- Students of color and international students represented over 11% of the Counseling Center population.
- The Health Center provided 149 physical examinations for international students.

- The Counseling Center conducted 10 conflict resolution programs and 54 diversity programs.
 - Two Counseling Center staff members served as ADHD consultants with the Office of Disabled Student Development.
 - Counseling Center staff members provided diversity training for staffs in both Student Affairs and Academic Affairs.
3. **Describe how your department contributed to the success of the Student Affairs Administration in Higher Education graduate program.**
- One Counseling Center staff member taught a semester-long Student Affairs Administration in Higher Education course on “Psychological Barriers to Learning.”
 - The director served on the graduate thesis committee for one student in this program.
4. **Describe how your department communicated university expectations to admitted students, their family members, and current students.**
- Counseling Center staff members participated in 27 orientation sessions.
 - Orientation training was provided for residence hall directors and advisors.
 - Orientation diversity training was provided for incoming graduate assistants.
 - Resource Room tours were provided for all incoming students who attended Freshmen Orientation.
5. **Describe how your department introduced career-planning services to new students and reinforced them throughout the baccalaureate experience.** Career exploration and planning was initially introduced to incoming students in the Counseling Center during the Resource Room tours. We offered 12-14 tours per day which were conducted every 15 minutes throughout the orientation period. Counseling Center staff members also participated in several other programs as follows:
- Classroom/outreach programs dealing with career exploration and development were presented to 24 classes with an additional 22 programs offered that dealt with Counseling Center services.
 - Career counseling was scheduled with 106 students, as well as additional service to 151 students on academic problems and 76 students on adjustment to the university.
 - Resource Room orientation tours were given which covered information on career counseling available in the Counseling Center and additional services available in the Career Resource Lab.
6. **Describe how your departmental intended outcomes of learning/development and service were achieved.** The Counseling Center used two instruments to measure outcomes of learning/development – the “Outcome Questionnaire -45” and the “Client Satisfaction Questionnaire.” The OQ-45 is a standard measure that is used nationally recognized and used in most counseling settings throughout the country. The OQ-45 was administered at intake, before the 4th session, and at termination. The Health Center continued to use the “Patient Satisfaction Questionnaire” which was initiated during 2002-03. Data from this instrument is compiled monthly and also provides feedback for medical providers. Both the Counseling Center and Health Education used the “Outreach Program Evaluation” which is completed by participants following outreach programs. Health Education also used a “Court Offenders Program Evaluation” and a “Condom Shop Survey.”

7. Describe how departmental collaboration with individuals and departments outside SAEM contributed to student success.

- Staff in all units of Counseling and Health Services contributed to student success by serving as consultants to faculty/staff on multiple and varied issues related to student health and adjustment. Counseling Center staff members served as liaisons to all academic departments to better help address faculty concerns and questions. Additionally, staff members assisted faculty in making referrals to the various units of Counseling and Health. Staff members of all units contributed to the request for interviews and information requested by the media. Also, the Lilly II grant provided opportunities for staff members to collaborate with others outside of SAEM particularly through the important Alcohol abuse/Social Norming project with the PEFWL classes.
- Testing Programs continued working to develop a relationship with Mathematical Sciences by agreeing to administer the Gateway Examinations to their special needs students. Also relationships were established with both the Finance and Psychological Sciences Departments to administer special departmental examinations -- the CPCU/IIA insurance examinations via a web-based testing system for Finance, and a special presentation on the GRE for Psychological Sciences.

8. Describe how your department mentored students. The Counseling Center mentored students through the training programs that were offered. Specifically, the Counseling Center had an APA accredited pre-doctoral internship program, an MA counselor certification internship, an MA internship practicum program, and a doctoral level field experience practicum. Health Education mentored students through its various assistantships and peer volunteer training.

Ball State University Goal 2 – Climate and Culture

Ball State University will promote a learning climate that values civility, diversity, multicultural awareness, appreciation of the arts, healthy and productive living, and environmental sustainability.

1. Describe how departmental programs/services facilitated student involvement and connection to Ball State University.

The main way in which Counseling and Health Services facilitated student involvement and connection to the university was through the numerous programs provided for students. Students were encouraged to become involved and engaged in whatever topic was presented. As mentioned, outreach programs made 27,020 student contacts this year. Also, through a special Virginia Ball Grant, one member of the Counseling Center staff wrote and actively participated in the ABSORBART.COM project that encouraged an appreciation of the arts.

2. Describe how departmental programs/services minimized negative influences (e.g., alcohol, illegal drugs, tobacco) that hinder student success. Most of the programs and services offered by Counseling and Health could potentially fit into this category. With the help of Lilly II funding, two major media campaigns were implemented during the year – Social Norming which encouraged more healthy alcohol use behavior, and –Be a Friend, Help a Friend,” which informed students about stress, anxiety, depression and encouraged treatment. Other programs offered include:

- Both Health Education and the Counseling Center offered substance abuse counseling.

- Both Health Education and the Counseling Center aggressively participated in outreach programming making 7,231 student contacts in over 138 hours.
 - The Counseling Center, through the Lilly II project, aggressively participated in outreach programming especially with the PEFWL classes.
 - Health Education participated in the Court Offenders program reaching an additional 81 students.
 - Alcohol Coordinator provided 334 individual sessions for students dealing with substance abuse issues.
 - Health Education continued to offer anonymous HIV testing through the Health Department with 129 students receiving this service.
 - Health Education sent out 1305 birthday cards to students who were turning 21 to encourage safety if they planned to use alcohol.
 - Health Education offered twenty (20) Smoking Cessation Groups throughout the year.
 - The Counseling Center offered campus-wide special programs for two awareness weeks – Sexual Assault (1137 student contacts) and Eating Disorders (1121 student contacts).
- 3. Describe how your department supported and celebrated human diversity.** Counseling and Health Services supported and celebrated human diversity in a variety of programs:
- The Diversity Team provided forty-eight (48) outreach programs which made 1513 student contacts.
 - Diversity training was provided for incoming teaching assistants.
 - Involvement with Safe on Campus, GLBT panels and GLBT groups promoted tolerance and acceptance.
 - The Men of Color Forum was provided.
 - Conflict resolution tips and interventions were provided to 190 participants.
 - Programming was offered and a needs assessment developed through collaboration with the Center for International Programs.
- 4. Describe how your department participated in the judicial process that handled grievances, mediation, and conflict management.** Counseling and Health Services participated in the judicial process.
- Staff members consulted with administrators about judicial proceedings as requested.
 - Staff members throughout Counseling and Health participated on various committees such as CIRT, Campus/Community Alcohol Coalition, SCLC, Student Rights, and Ethics and Standards.
 - Two Counseling Center staff members participated in a consulting role to reexamine the judicial process/response in reference to sexual assault.
- 5. Describe how your department met on-campus and weekend activity needs of students.**
- One staff member participated in the “Late Nite” program in affiliation with the Lilly II Grant.
 - The Saturday Testing program served 1,761 students.
 - Staff participated in numerous outreach programs, responded to multiple traumatic events on campus and in residence halls, and responded to 206 after hours crisis/emergency situations.

Ball State University Goal 3 – Faculty and Staff

Ball State University will attract and retain high-quality faculty, professional personnel, and staff.

- 1. Describe how your staff were involved with professional organizations. List leadership roles that departmental staff held in professional organizations during the past year.**
 - Kent Bullis, Anna Lamb, and June Payne served as members of American College Health Association.
 - Kent Bullis participated in the Midwest College Health Association and will serve as president of this organization next year.
 - Kim Gorman, Jay Zimmerman, Gina Zanardelli, Robin Lett, Robyn Geelhoed, Ellen Mauer, and June Payne served as members of the American Psychological Association.
 - Jay Zimmerman was a member of the Association of Counseling Center Training Directors.
 - Robin Lett served as a member of the Counseling Center Clinical Directors Association.
 - June Payne was a member of the Indiana Psychological Association and the Association of College Counseling Center Directors.
 - Lee Van Donselaar, Ellen Mauer, Kim Gorman and Robin Lett served as members of the Indiana Eating Disorders Task Force.
 - Ellen Mauer served as chair of the Medical Associates Committee at BMH and chair of the Eating Disorders Task Force.
 - Jeff McCoy served as a member of the Indiana Professional Association of College Testing Personnel.
 - All staff maintained credentials that allowed for continued accreditation with both the American Psychological Association and the International Association of Counseling Services.
- 2. List awards or recognitions that departmental staff received during the past year.**
 - Kent Bullis will receive an award for “Outstanding New Professional” during the ACHA national meeting in New Orleans.
 - Kim Gorman received the SAEM “Outstanding New Professional Award” during April, 2004.
 - Gina Zanardelli, Robin Lett, and Robyn Geelhoed received the Health Service Provider in Psychology licensure this year.
 - Jay Zimmerman received “Honorable Mention” for the BSU training program from the Association of Postdoctoral and Psychology Internship Centers (APPIC).
 - John Stachula completed the requirements for the Ph.D. during April of this year.
- 3. Describe departmental efforts or successes to increase the employment and retention of underrepresented groups.** Counseling and Health Services was committed to exploring opportunities to increase the employment and retention of underrepresented groups. We actively sought out and recruited applicants with a diverse background whenever there was an open position. This philosophy was also reflected in the recruitment of applicants for all of our training programs.
- 4. Describe departmental training initiatives.**
 - During the 2003-04 academic year, Counseling and Health Services remained active in its various training programs. The Counseling Center employed three pre-doctoral interns in its APA accredited training program. We also employed three Masters level

graduate assistants who were in-training for the 900 hour Counselor Certification.

Additionally, staff members of the Counseling Center provided supervision and training for six other Masters level counselors-in-training and six doctoral level students.

- In-service training for staff members was accomplished during the ongoing Journal Club meetings. We held three Journal Club presentations during the academic year. It should be noted that these in-service trainings contribute to the overall requirement for all HSPP level psychologist to maintain licensure.
- Health Education provided a total of 33 training opportunities for students and members of the community. Health Education provides Adult CPR and First Aid Training in cooperation with the American Red Cross. Another training initiative included educational training for peer health educators who assisted the training of other students.

Ball State University Goal 4 – Enrollment

Ball State University will attain optimal enrollment based on selective admissions policies and successful retention programs.

1-5. Describe how your department advanced the university's enrollment plan; (2) how your department advanced the university's retention plan; (3) departmental strategies to attract and enroll students of color; (4) how your department used technology to improve service to enrollment groups; and, (5) departmental efforts to improve the quality of services or programs provided for students/clients. Counseling and Health Services advanced the university's enrollment and retention plans through most if not all of the services we provided. Our programs promoted psychological and physical health as well as healthy lifestyles all of which seem paramount in helping students stay in school. Several programs contributed specifically to enrollment and retention:

- The Counseling Center continued to provide the "Challenge of Change" orientation program for the parents of incoming students. A total of 3,146 participants were served in 27 orientation programs.
- Roughly 38% of the students who enter counseling indicated problems with staying in school. Of the students surveyed on the "Client Satisfaction Questionnaire," roughly 92% indicated that counseling helped them to stay in school.
- The Lilly II Grant initiative continued to target the emotional problems of depression, anxiety and stress which summarily contribute to premature student dropout and withdrawal from the university. This year, the Lilly II initiative helped us to reach 1944 participants by providing 111 "Stress Free Zones" and other programs dealing with stress management. "Be a Friend-Help a Friend" was another Lilly II initiative that helped with student retention by encouraging students to either seek help for emotional distress and/or help their friends become consumers of mental health services when/if needed.
- The National Testing Program provided more than 4000 testing opportunities for students through the various testing programs that included: computer based testing, National (Saturday Program); GED; Math Placement; Prometric; and CLEP.

Ball State University Goal 5 – Technology

Ball State University will continue to be a best-practice institution in the innovative use of instructional and information technology.

1. Describe how your staff improved or increased the use of technology. The staff members of Counseling and Health Services have valued the use of technology and the benefits and enhancements to the quality of work that it provides. Our commitment to the use of technology has been longstanding and continues to date. We strive to be a best-practice department through the use of technology. This year's work provided several highlights in technology:

- The Health Center is in the process of becoming the first medical facility of Cardinal Health Systems that will use an electronic record keeping system allowing for greater access and continuity of care for BSU students.
- As a means improving outreach to students in a different format, PowerPoint training was offered and provided for most staff members of the Counseling Center.
- A Technology Committee was established for Counseling and Health Services that is in the process of developing a web interface for Counseling Center intake paperwork, the potential use of Flash and/or video streaming on our website, document imaging, and the potential for use of Vignette Dialog.
- Jeff McCoy coordinated, trained and implemented the transition from a Novell Netware server to a new Windows 2000 server environment encompassing all of SAEM.
- Jeff McCoy was also appointed by the director to serve on the "Technologies Across Student Affairs" committee and actively worked to redesign the Counseling Center system to accommodate the BSU transition from SSN to the new ID numbers;
- During the year we unfortunately witness the demise of the iSeeTV project which represented a collaboration with Media Logic of England and the Center for Media Design. This project which was implemented in both the Health and Counseling Centers provided a computer based consultation service to students about health and career issues. Multiple liability issues raised by Cardinal Health Systems and technology failures within the Counseling Center eventually led to a mutual decision to discontinue the project.
- Health Education implemented a computer based data keeping system that allows for improved accounting of services to students.
- The Counseling Center continued to move forward to become totally electronic in record keeping with emphasis on improved data collection, greater research capabilities, and easier access for students.

Ball State University Goal 6 – Relationships Beyond the Campus

Ball State University will broaden, diversify, and enrich its relationships beyond the campus.

1. Describe how your department communicated and collaborated with community agents. Staff members of Counseling and Health Service communicated and collaborated with community agents in multiple ways. Staff members seem to be well connected within

the greater community and offered their skills and service to improve campus and community relationships. Given the many different interests of staff, there was a wide array and variance of community involvement. Several staff members continued to be active as Medical Associates affiliates of BMH. The status of Medical Associate allows staff members the opportunity to improve service to student/clients who may be hospitalized. Also, many staff members were active in organizations and churches that allow for opportunities to serve and volunteer in various capacities:

- Lee Van Donselaar did a series of three performance enhancement consultations with a Family Practice Resident at BMH.
- Ellen Mauer served as chair of the BMH Medical Associates Committee.
- Jay Zimmerman obtained a grant to celebrate African American Life and Art as well as his work with the arts community as a member of the Muncie Board of Directors for Mitchell Place Gallery.
- John Stachula passed the qualifying examination computer based testing and worked with the National Saturday program that targets the community as well as BSU students.
- Robin Lett, Robyn Geelhoed, Kent Bullis, Beth Hale, Donna Koger, Rose Monroe, Anna Lamb, Shirley Kelly, and June Payne were active with volunteerism through their local churches.
- June Payne participated in two community service organizations—Altrusa Club of Muncie and the Coalition of 100 Women—and has served as Co-Chair of the Underwriters Committee for Altrusa, Immediate Past President and Chair of the Cotillion for the Coalition.

General Statements

1-2. This year's university report will highlight the most significant accomplishments achieved since the university strategic plan was initiated. Please describe major departmental accomplishments since 2001 of which you are most proud. (2) If there is something else you would like to include in this report (e.g., new programs, services, initiatives, achievements, important items that do not fit somewhere else), please do so here. Although not covered in the previous sections, there are several important items related to Counseling and Health Services that should be noted in this report. Given the multiple traumas that occurred on our campus this year, Counseling and Health Services was challenged to respond in a number of ways and rose to a higher level with its response. First, it should be noted that during this exceptionally challenging year, Counseling and Health Services successfully transitioned from one director to another with no disruption of service to the BSU community and a continued commitment to improving both quantity and quality of service. Other highlights for this year include:

- Trauma Response Team members responded to student, faculty and staff with all aspects of the various campus traumas. As requested by the director, ALL staff members responded by providing after hours outreach and service that total over 23 clock hours.
- Testing Programs successfully completed Phase II of renovations for the Computer Based Testing Program. During its first year which ended in March _04, a total of 2082 examinees participated in this testing format. CBT continues to grow in numbers and applications.

- The merger between the Counseling Center, Health Center and Health Education that created Counseling and Health Services continued to improve this year. We achieved greater collaboration in all areas of service to students.
- The Lilly II Grant provided exceptional information and service to the BSU community in reference to alcohol abuse, depression, anxiety and stress. Research data from the various Lilly II projects are now becoming available which demonstrate the effectiveness of these interventions. Of particular note this year is the “Be a Friend—Help a Friend” project as well as to “Zero to Four” social norming project. Specific reports on the Lilly II project are available under separate cover.
- Health Education participated in two needs assessment surveys, the National Probability Sample and the ACHA National College Health Assessment, which provided additional data about BSU students’ health concern/needs. This data will allow us to better implement service and provide information to students.
- “Concerned Charlie,” the online Dear Abby format for students, totaled a record high over 7000 hits to the webpage. The committee has done an outstanding job with editing these responses, but all staff members contribute to the writing and production;
- The Counseling Center has continued its work with client outcome assessment of the counseling experience. We continually gather data using the Outcome Questionnaire-45 that allows us to determine the effectiveness of counseling at various levels of the therapeutic intervention.
- Staff members have been willing to work with academic departments by providing an increased number of crossover collaborative work and teaching opportunities. Quinton Edwards, Gina Zanardelli, Robin Lett, Robyn Geelhoed, and Kim Gorman have all taught classes for academic departments.

2004-05 DEPARTMENTAL REPORT COUNSELING AND HEALTH SERVICES

COUNSELING CENTER

Major Departmental Functions, Programs, Services, Activities, and Outcomes

Function 1: Short-term, personal and career counseling

The Counseling Center provides short-term personal and career counseling for students in both individual and group modalities. Numerous personal issues are addressed in counseling including depression (mood disorders), anxiety, relationship problems, eating disorders, adjustment disorders, traumatic stress, etc. Individual consultation (intake and referral) is also provided for faculty and staff. By treatment modality, the services provided for the 2004-05 year are as follows:

- **Intake assessments:** A total of **1115** individuals requested and received new intake assessments: regular non-emergency intake assessments were provided for **922** students; crisis/emergency intake assessments were provided for **159** students; and individual consultations were provided for **34** faculty/staff members who were seen for intake and referral. Of the 1115 intake assessments completed, 956 were included in the therapy outcome study. The statistics represented included: regular intake assessments, 86%; crisis/emergency intakes, 14%; male clients, 28%; female clients 72%; symptoms within clinical range, 62%; symptoms not in clinical range, 38%; significant thoughts of suicide, 11%; no suicidal thoughts, 89%; significant thoughts of violence toward others, 8%; and no thoughts of violence toward others, 92%.

Outcome data included with individual therapy data.

- **Individual Therapy:** A total of **1080** clients received individual therapy in the Counseling Center during 2004-05. Over **8450** hours of individual therapy were offered of which roughly **6000** hours were used by students. An average of **5.5** sessions was provided per student. Although students are seen for many different presenting problems, the most frequent problems continue to be depression/mood disorders, 20%; relationship problems, 20%; anxiety problems, 14%; and self-confidence and self-esteem, 7%.

Outcome: In order to examine the effectiveness of therapy services that clients receive in the Counseling Center, three (3) outcome measures have been used – the Outcome Questionnaire 45 (OQ-45), the Personal and Confidential Data Form (PCDF), and the Client Satisfaction form. Because of the complexity of the data and statistical analyses, a more comprehensive analysis should be available at a later point during the summer. For the purposes of this report, however, the outcome of therapy

in the Counseling Center continues to indicate that clients show significant improvement in symptom distress as measured by the OQ-45 and the PCDF, which correlates positively with the OQ-45. In order to demonstrate a significant change/improvement, the Reliable Change Index (RCI) must reach 14. During the 2004-05 year, clients in the Counseling Center achieved an RCI level of 22.5, $p < .001$. Three measures of the OQ-45 are taken – at intake, after three sessions, and at termination. Also as predicted, no measurable change has been noted between the intake session and session three for either fall or spring semesters. It is expected that significant change will occur between the intake session and termination. A significant RCI was reached for fall semester '04, $p < .04$; and spring semester '05, $p < .002$.

A sampling of 189 Counseling Center clients completed the Individual Counseling Client Satisfaction measure. This measure continues to show a >96% satisfaction level. Further, 33.3% of the client sample indicated that their counseling experience helped them to stay in school. Another 40% indicated that counseling improved their feelings of being more at home and comfortable in the university environment. The complete summary of client satisfaction is available upon request.

- **Career Counseling:** A total of **193** students were seen for career, academic, and vocational problems. As part of the career counseling services, many clients also participate in career testing services. Please refer to the specifics of testing as reported in the National Testing Program function area.

Outcome data included with individual therapy data.

- **Group Counseling:** A total of **16** different therapy groups were offered during 2004-05 – **eight (8)** during fall semester, and **eight (8)** during spring semester. Several different group topics/themes were represented during the year including assertiveness training, eating disorders therapy, general therapy, GLBT support, non-traditional women's support, women's support, and sexual abuse/assault therapy. A Men of Color Forum was also offered through the Multicultural Center. Fall semester groups served **49** different individuals who made **319** contacts, and met on average 8.5 weeks throughout the semester. Spring semester groups served **33** individuals who made **310** contacts and averaged 13 weeks during the semester.

Outcome data for group counseling is represented as a measure of group participant (client) satisfaction. Client satisfaction data also provides a self-reported measure of improvement in symptoms, functioning, change, etc. A total of 59 group participants completed client satisfaction data. During 2004-05, the results revealed that 78% of the participants reported feeling better about themselves with an additional 20% indicating that they felt somewhat better. Also, 64% of the participants indicated that they were able to deal more effectively with their problems while an additional

30% indicated that they were somewhat able to deal more effectively with their problems. The complete summary of group client satisfaction is available upon request.

Function 2: 24-hour crisis/emergency response services

The Counseling Center provides 24-hour crisis/emergency response services including after-hours emergency coverage for the BSU community. Clients who receive crisis/emergency services generally report severe distress including suicidal ideation, anger management, and acute trauma, (e.g. sexual assault, death of a loved one, etc.). A total of **159** students were served by the emergency response system. Additionally, **192** students received services by the Trauma Response Outreach team.

Outcome: None available.

Function 3: Psychiatric consultation services

The Counseling Center provides free psychiatric services on-site for students who are clients in the Center. A total of 12 psychiatric hours are provided weekly in the Center during fall and spring semesters. No psychiatric service is provided during breaks and limited service is provided during the summer. A total of **394** psychiatric consultations were provided for students during 2004-05. Students may also be referred to the Health Center for medical and psychiatric consultation. An additional **120** students were referred to the Health Center for psychiatric consultation. **Forty-one (41)** students were referred from the Health Center to the Counseling Center for on-going counseling. Data for students who receive psychiatric services in the Health Center is provided in the overall Health Center statistics.

Outcome: None available.

Function 4: Mental health related outreach and consultation services

The Counseling Center provides comprehensive psychological outreach and consultation services for the BSU community. Faculty, staff, and students are notified (internet and hard copy) of all available programs offered by staff in the Center and subsequently make contact with Center staff to request programs. Although some programs are offered in residence halls and through campus-wide events such as Sexual Assault and Eating Disorder Awareness Weeks, most outreach services are requested by faculty and are provided in classroom settings.

In order to provide a comprehensive outreach program, staff in the Counseling Center work together in teams to cover broad topic areas of interest to faculty and students. The functional outreach teams include: Career; Crossing Borders (international student programming); Diversity; Eating Disorders; Health; Myers-Briggs; Sexual Assault; Stress/Academic; and Trauma Response. During 2004-05, Counseling Center outreach

teams provided **906** programs and reached **32,255** student and faculty/staff contacts. Teams provided over **1420** hours of outreach programming.

Outcome: During 2004-05, a sampling of **3115** outreach participants completed an evaluation of an outreach program. A summary of this evaluation data indicated that all participants (100%) believed that the content of the outreach program was clear and easy to understand. Further, 96% of the participants believed that the information provided was useful to them. The results also indicated that outreach programs received an overall **95% good to excellent** rating.

During the past four years, the Counseling Center also received grant funds from the Eli Lilly Foundation which helped provide services to students by allowing the formation of two additional outreach teams – Lilly II (stress, depression and anxiety) and Lilly II (Alcohol Use).

- **Concerned Charlie**, which is also a Counseling Center outreach team that operates in a “Dear Abby” format to answer student’s personal questions/concerns via the internet, received **9,653** hits on the web page. Staff responded to **114** questions from students.
- **Counseling Center Web Page** offers an abundance of psychological information and numerous links to additional resources. During 2004-05, the web page received a total of **24,561** hits for an average of **68** hits per day. The most frequently accessed web pages included: Concerned Charlie; Counseling Center Services; stress management; career information; testing services, etc.
- **Lilly II (stress, depression and anxiety)** team members provided the following outreach services: Stress Free Zones; classroom presentations; on-line screenings; faculty presentations; and the “Be A Friend, Help A Friend” initiative. The statistics for this outreach team are as follows:
 - Stress Free Zones: **289** programs, **727** hours, **8143** student contacts
 - Classroom presentations: **113** programs, **4638** student contacts
 - On-line depression screening: **5003** students surveyed

Outcome: Unlikely to be depressed, 29%; Likely to be depressed, 54%; and Very likely to be depressed, 16%. Of those students surveyed, 858 or 17% indicated thinking about suicide some of the time; 119 or 2.4% of the students indicated that they thought of suicide most of the time; and 56 or 1% of the students reported thinking about suicide all the time. Note: Complete data is available upon request.

- **Lilly II (Alcohol Use)** Team surveyed over **3500** students in the university core curriculum PEFWL classes during 2004-05. The results of the surveys were used in the development of a social norming based intervention which was then presented back to students. Social norming data was also presented via various other media including the *Daily News*, television, radio, etc.

Outcome: Survey data was collected from 2001-2004. The findings suggested a trend in the desired direction with movement occurring from the higher alcohol use level to the lower use levels. Note: complete data is available upon request.

Function 5: National testing program

The Counseling Center provides national testing services for students on campus as well as for those living in the local and regional communities. During 2004-05, Computer Based Testing through the Educational Testing Service served a total of **2313** participants and accounted for 48% of all testing provided in the Counseling Center. National Saturday Testing served **1009** participants and accounted for 31% of Counseling Center testing. The university Testing Programs served **210** participants and accounted for over 4% of all testing.

Outcome: None available.

Function 6: Psychodiagnostic and career assessment

The Testing Program also provides psychodiagnostic and career assessment testing as requested by therapists in the Counseling Center. Testing is usually requested in conjunction with personal counseling services as well as outreach programs. A total of **216** clients were tested using either psychological tests and/or career assessment inventories. This number represents over 4% of all testing. Outreach programs requested testing services for **656** participants and accounted for over 13% of Counseling Center testing.

Outcome: None available.

Function 7: Training programs (e.g., APA pre-doctoral internship)

The Counseling Center has four training programs: a doctoral internship accredited by the American Psychological Association; a doctoral practicum program for doctoral students who are at least in their second year of doctoral training in Counseling Psychology; a Master's internship for second year Master's trainees in Counseling Psychology; and a Master's practicum in Clinical Psychology for student in the Master's program in the Department of Psychological Science. The Counseling Center also offers opportunities for supervised practice to faculty in both the Counseling Psychology and Psychological Science Departments.

Doctoral Interns: On average, the three doctoral interns each provide roughly 12-14 clinical hours per week of individual therapy. Additionally, they participate in the group therapy program and the crisis/emergency response services. During 2004-05, doctoral interns specialized in the following areas: eating disorders; sexual assault, abuse and trauma; and stress and anxiety disorders. They provided **110** outreach programs and coordinated both an Eating Disorder and Sexual Assault Awareness Week.

Outcome: All three doctoral interns will graduate on July 31, 2005. All three have secured employment in counseling centers for next year.

Doctoral Practicum: Six doctoral students were selected to participate in the doctoral practicum program. There is a 10 per week minimum requirement for students to participate. All students provided at least 6 clinical hours per week and participated on one of the Center's outreach teams.

Outcome: None available.

Masters Training: Six Masters Interns and two Masters practicum students also worked in the Counseling Center. Masters training for these students is accredited by The Council for Accreditation of Counseling and Related Educational Programs (CACREP) of which the Counseling Center meets all requirements as a training site. Each intern provided 20 hours per week and provided both individual clinical and outreach services. During 2004-05, the eight students provided 1967 service hours.

Outcome: Of the eight students, one will begin a Ph.D. program in Counseling Psychology at Western Michigan University. Two will be employed as therapist and one will be working in Malaysia as a Fulbright Fellow.

Awards and/or Recognitions:

Counseling Center staff members received the following awards and maintained the following professional recognitions:

- Ph.D. Counseling Psychology (Stachula, John)
- Hurley Goodall Distinctive Faculty/Staff Award (Edwards, Quintin)
- Outstanding Student Employee, SAEM Annual Awards – (Grouden, Jennifer)
- Health Service Provider in Psychology (Edwards, Quintin; Geelhoed, Robyn; Gorman, Kimberly; Lett, Robin; Mauer, Ellen; Payne, June; Van Donselaar, Lee; Zanardelli, Gina; and Zimmerman, Jay)
- Medical Associates, Ball Memorial Hospital, (Geelhoed, Robyn; Gorman, Kimberly; Lett, Robin; Mauer, Ellen; Payne, June; and Van Donselaar, Lee)

Professional Activities of Staff:

- Member of APA (Geelhoed, Robyn; Gorman, Kimimberly; Lett, Robin; Mauer, Ellen; Payne, June; Van Donselaar, Lee; Zanardelli, Gina; and Zimmerman, Jay)
- Member of IPA (Payne, June)
- Member of Association of University College Counseling Center Directors (Payne, June)
- Member of Association of Counseling Center Training Directors (Zimmerman, Jay)
- Member of Association of Counseling Center Clinical Coordinators (Lett, Robin)

Staff members have also presented programs dealing with multiple topics at conferences, attended workshops, taught classes in the Counseling Psychology and Psychological Science Departments, created a new video, and reviewed and co-authored books and articles. A sampling of the types of presentations and professional activities staff members have participated in include:

- Administration and Use of Wechsler Abbreviated Scale of Intelligence (Zanardelli, Gina)
- MLK Interracial Values
- "Learning from Hate." (Edwards, Quintin)
- "Organizing College Student Support Groups" – Mid American Health Association Annual Meeting
- State Conference for High School Guidance Counselors
- State Conference for Elementary Guidance Counselors
- Co- published article: "Campus Mental Health Services: Recommendation for Change" in the *American Journal of Orthopsychiatry* (Lett, Robin)
- "Legal & Ethical Issues for Mental Health Practitioners" (four staff members)
- Reviewed journal article "Multicultural Issues that Impact the Treatment of Psychopathology in Schools" for an upcoming special issue of *Psychology in the Schools*. (Lett, Robin)
- "Counseling Center Psychologists Supporting LGBT Campus Community" (Zanardelli, Gina)

Sample of workshops attended:

- "Managing Suicidal Students: Advantages and Disadvantages of Different Approaches"
- "The Pros and Cons of a Dedicated Case Manager"
- "Counseling Clients Who Question their Sexual Orientation"
- "Living with Grief: Ethical Dilemmas at the End of Life"
- "Legal and Ethical Issues for Mental Health Practitioners"
- "Multicultural Approaches to LGBT Community Violence"
- "Autism Spectrum Disorders"
- "Effective Leadership Styles of Clinical Coordinators"
- "Emotional Focused Couples Therapy"
- "Parallel Empowerment: Feminist Supervision"

Departmental name – Student Health Center

2004-05 Report of Programs, Services, and Activities

Major Departmental Functions

- Provide medical care to University students
- Track and enforce compliance with State of Indiana Immunization Requirements
- Provide medical care to University employees with work related injuries
- Provide medical evaluation of employees prior to return to work after illnesses and injuries
- Provide medical care to Indiana Academy students

Programs, Services, and Activities

- Walk-in urgent clinic
First-come first-served urgent care clinic providing primarily acute but also some chronic medical evaluation and management services. During the academic year **10392** patients were seen for **17630** visits.
- Women's Center
Clinic seeing women for women's issues on a scheduled as well as walk-in basis. They had **2642** visits during the academic year.
- Pharmacy
Filled **16738** prescriptions
- Physical Therapy
Saw **1318** employees for **3312** visits
Saw **2747** students for **5151** visits

Outcomes

- The health center achieved an overall patient satisfaction score of **82%** during the academic year.

Departmental Awards or Professional Involvement

- Kent Bullis, Medical Director, is President of the Mid-America College Health Association this year.
- Gateway Health Clinic, Board of Directors.

2004-05 DEPARTMENTAL REPORT COUNSELING AND HEALTH SERVICES

HEALTH EDUCATION

Major Departmental Functions, Programs, Services, Activities, and Outcomes

Function 1: Campus/Community Health Promotion

- National College Health Assessment: Regularly conduct random student health survey to assess health behaviors and attitudes; results are compiled by the American College Health Association and compared to scores of all participating schools. Next assessment is scheduled for Spring 2006. Fall 2003 assessment surveyed 300 students. Outcomes not available.
- Campus-wide Outreach Events: Tabling and other awareness activities providing information and interactive material on a variety of health topics, including back pain prevention, breast cancer, alcohol use and misuse, smoking cessation, AIDS, recreational drugs, sexual responsibility, nutrition, etc.; 67 events were held in 2004-2005 academic year reaching 4,007 students. Outcomes not available.
- 21st Birthday Cards: Electronic birthday card sent to students on their 21st birthdays encouraging them to celebrate responsibly. 1,783 were sent in 2004-2005 academic year. Outcomes not available.
- Individual Counseling: Counseling available to students as needed on any health topic, most commonly sexual health, nutrition, healthy relationships, or addictive behaviors. 28 students received individual counseling in 2004-2005 academic year. Outcomes not available.
- Health Education Website: Maintain and monitor department website, which received 93,326 hits in Fall 2004 and Spring 2005. Outcomes not available.

Function 2. Educational Programs and Services

- Universal Precautions Training: OSHA-approved training for students and employees in positions with potential for exposure to blood or other body fluids. Presented to 944 students and staff in 2004-2005 academic year.
Learning and development outcome- Participants receive training in the areas mandated by OSHA, including statistics, disease transmission and presentation, and steps for cleaning and documenting a body fluid spill. No exposures were reported during 2004-2005 academic year.

Quality service outcome- Participants completed the *Counseling Center and Health Education Outreach Program Evaluation*, with results generally indicating that participants found the content clear, easy to understand, and useful, and their overall evaluation of the program was good or excellent.

- FreshStart Smoking Cessation Classes: Two-week, four session class created by the American Cancer Society offered to students, faculty/staff, and members of the Muncie community who wish to quit smoking. Provided to 32 participants in 2004-2005 academic year.

Learning and development outcome- The creator of the FreshStart curriculum, the American Cancer Society, evaluates impact of the program continuously and has found it to have a quit rate of 30% after one year.

Quality service outcome- Each participant completed the *Counseling Center and Health Education Outreach Program Evaluation*, with results generally indicating that participants found the content clear, easy to understand, and useful, and their overall evaluation of the program was good or excellent.

- Weight Loss Challenge: Ten-week program coordinating resources of Health Education, Office of Recreation Services, Family and Consumer Sciences, Counseling Center, and the Adult Physical Fitness Program. Provided to 41 students and faculty/staff in 2004-2005 academic year.

Learning and development outcome- The Fall 2004 Challenge was a pilot program. The group's overall weight declined by 25% over ten weeks and the winner of the Challenge lost 13 pounds. During the Spring 2005 Challenge, the group's overall weight declined by 37%, and the winner of the Challenge lost 19 pounds.

Quality service outcome- Each participant completed the *Counseling Center and Health Education Outreach Program Evaluation*, with results generally indicating that participants found the content clear, easy to understand, and useful, and their overall evaluation of the program was good or excellent.

- Court Offenders Program: Six-week program for students who have been arrested or ticketed for an alcohol offense and referred by an attorney, probation officer, judge, or Dean of Students. Provided to 59 students in 2004-2005 academic year.

Learning and development outcome- Pre- and post-tests were administered to every participant and measured using Prochaska's Theory of Behavior Change. Each group demonstrated movement in a positive direction on the continuum of change.

Quality service outcome- Participants evaluated session content and quality of facilitators; evaluations showed favorable attitudes towards the content and presentation technique.

- Marijuana Education Class: One to two hour class for students arrested or ticketed for a marijuana offense and referred by an attorney, probation officer, judge, or Dean of Students. Students are also assessed using the Multidimensional

Addictions and Personality Profile (MAPP). Provided to 22 students in 2004-2005 academic year. Outcomes not available.

- AlcoholEdu: Three-hour computer-based program for students referred by the Dean of Students due to their first alcohol offense. Students are also assessed using MAPP. Provided to 130 students in 2004-2005 academic year.

Learning and development outcome- The contractor for AlcoholEdu, Outside the Classroom, conducts an evaluation annually. The outcomes for 2003-2004 were positive and indicated students were drinking less and suffering fewer problems due to drinking. Outcomes for the current year have not yet been received.

- Brief Alcohol Screening and Intervention for College Students (BASICS): One to two hours or more of individual counseling for students covering a variety of issues, including social norms, perceptions, laws, situational behaviors, and MAPP assessment. Students are referred to BASICS by the Dean of Students for their second alcohol offense or when over 21 years of age. Provided to 23 students in 2004-2005 academic year. Outcomes not available.

- Alcohol Evaluations: Alcohol assessments completed as requested by the local courts or the Dean of Students' office. 173 students assessed using MAPP and interviews during 2004-2005 academic year. Outcomes not available.

- Adult CPR and First Aid Training: Three-hour classes for students leading to certification or re-certification in adult CPR or First Aid through the American Red Cross. Certified 32 students and faculty/staff in 2004-2005 academic year.

Learning and development outcome- Participants demonstrate knowledge of life-saving techniques and wound treatment through successful completion of the American Red Cross's certification exam.

Quality service outcome- Each participant completed the *Counseling Center and Health Education Outreach Program Evaluation*, with results generally indicating that participants found the content clear, easy to understand, and useful, and their overall evaluation of the program was good or excellent.

- HIV/Syphilis Testing: HIV blood antibody tests, blood syphilis tests, and pre- and post-test counseling conducted every Tuesday afternoon by appointment through cooperation with the Delaware County Health Department. Tested 113 students in Fall 2004 and Spring 2005. Outcomes not available.

- Student Organization, Residence Hall Programming, and Classroom Programming: Presentations and programs prepared on request for any student group. 30 presentations/programs reaching 1461 students in 2004-2005 academic year.

Quality service outcome- Each participant completed the *Counseling Center and Health Education Outreach Program Evaluation*, with results generally

indicating that participants found the content clear, easy to understand, and useful, and their overall evaluation of the program was good or excellent.

- Condom Shoppe: Make available latex condoms free to BSU students during office hours; limit 5 per visit. 2,107 students visited the Condom Shoppe during the 2004-2005 academic year.

Quality service outcome- 131 visitors to the condom shoppe were surveyed in the spring semester regarding satisfaction with the service. Results showed that 73.9% of visitors to the shoppe use condoms most of the time (27.7%) or always (56.2%) when engaging in sexual intercourse. The majority of visitors who were referred to the condom shoppe (73.1%) were referred by a friend. The majority of visitors to the shoppe (52.3%) also visit 6 or more times each year, and 81.5% are always (34.4%) or mostly (46.1%) satisfied with the selection. One student wrote on his/her survey, "It's a great thing to have on campus. Otherwise I'm not sure I would use protection as much as I do."

Function 3. Provides experiential education opportunities for students.

- Peer Health Educators: Supervise student volunteers serving as peer health educators, including developing peer education training, coordinating volunteer hours, and serving as an information resource. 30 students were involved in program planning, presentations, peer theater, and group facilitation in 2004-2005 academic year. Outcomes not available.
- Health Education Interns: Supervise students wishing to gain health education experience for semester-long internships. 2 student interns in 2004-2005 academic year. Outcomes not available.

Departmental Awards or Professional Involvement

Awards/Recognitions of Staff

Anna Lamb received the Outstanding Treasurer's Award from the North District Optimist International, Inc.

Tikisa Walker, the graduate assistant in HE, received the Multicultural Center's Distinguished Service Award in April 2005.

Professional Involvement of Staff

- Member of Campus Community Coalition (Thomason)
- Member of American College Health Association and Mid-American College Health Association (Thomason and Lamb)
- Member of Society for Public Health Education and Indiana Society for Public Health Education (Thomason)
- Member of Student-Athlete Substance Abuse Committee (Lamb)
- Secretary of Campus Community Coalition (Lamb)
- Member of Delaware County Coordinating Council to Prevent Alcohol and Other Drug Abuse (Lamb)

- Member of Indiana College Action Network and of its Executive Board and Conference Planning Committee (Lamb)
- Member of Governor's Commission for a Drug-Free Indiana and its Regional Advisory Board (Lamb)
- Member of Indiana Coalition to Reduce Underage Drinking (Lamb)
- Member of Indiana Student Affairs Association and its Conference Planning Committee and Evaluator (Lamb)
- Working with Delaware County Community Corrections to develop an information panel for court offenders in the county (Lamb)
- Member of Alcohol Forum Coalition of Indiana (Lamb)
- Professional Presentations (Thomason)

Marilyn M. Gardner, Wayne Higgins, Charles Wainright, and Lisa K. Thomason. Assessing emergency medical service providers' knowledge of weapons of mass destruction: Statewide results. Poster presentation. Presented 11/8/04.

Marilyn M. Garder and Lisa K. Thomason. Weighing in: Pediatricians' and parents' perceptions of pediatric weight management. Oral presentation. Presented 11/9/04.

General Statements

The 2004-2005 academic year was an unusual one for Health Education. Early in the Spring 2005 semester, the Alcohol Education Coordinator suffered a broken ankle, which required her to be at home for 7.5 weeks. Consequently, the number of students she met with and the number of presentations she made are down compared to last year's numbers.

**2005-2006 Year End Report
Counseling Center**

Summary of Highlights:

- **Clinical Services** – Implemented two new clinical programs, “**Suicide Tracking**,” and monitored **326** students who posed a risk of self-harm; and provided mandatory two-session evaluation interviews with **73** students who were referred by CIRT.
- **Clinical Services** – Responded to **212** Crisis/emergency consultations with students during, and conducted and additional **225** crisis/emergency intakes. Provided **970** regular intakes through 3/31/06. Generated a total of **5579** individual and group hours through 3/31/06.
- **Client Satisfaction** – Maintained a 95% individual counseling client satisfaction rating during 2005-06. Although for most students staying in school was not an issue when the attended counseling, 31% of counseling seekers indicated that their counseling experiences helped them to stay in school.
- **Outreach and Consultation** – Provided **918** outreach programs during 2005-06 with a **92.8%** good/excellent rating, an increase of 1.3% from 2004-05 (906 programs); 13.8% increase from 2003-04 (806 programs); 14% increase from 2002-03 (803 programs); and a 27% increase from 2001-02 (722 programs).
- **Outreach and Consultation** – Provided outreach program contacts for **34,303** participants during 2005-06, an increase of 6% from 2004-05; 35% increase from 2003-04; 15.9% from 2002-03; and a 16% increase from 2001-02.
- **Technology** – Improved data collection by implementing web-based *Client Satisfaction Questionnaire and Group Client Satisfaction*; and updated the *Outreach and Consultation Evaluation Form*
- **Testing Programs** – Provided **4415** test administrations that included Computer Based, Internet Based, National Saturday, and Counseling Center testing programs that represents a **25%** increase in total testing from 2004-05.
- **Training** – Provided immersive training experiences for three pre-doctoral interns, 10 Master’s Interns, and seven doctoral students. The three pre-doctoral interns’ hours are still being calculated for the 2005-06 internship year which ends July 31. Previous years, 2001-2005 included a total hourly contribution for direct service, clinical contact, supervision and outreach as follows: **3434; 3443; 3294; and 3242**. Masters interns provided a total of **2070** direct service hours for 2005-06 which is a slight decline in hours from 2004-05 (2291).

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Outreach and Consultation

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Mental Health Outreach Programs Presented	Total Program Count	'05-'06 = 918	'04-'05 = 906 '03-'04 = 806 '02-'03 = 803 '01-'02 = 722	Comparative growth of the program; percentage increase/decrease in use; trends in program requests; relative demand for outreach requests
Outreach hours generated	Total accounting of staffing hours	'05-'06 = 1287	'04-'05 = 1420 '03-'04 = 992 '02-'03 = 918 '01-'02 = 1765	Use of staffing resource – time/hours generated – in preparation and planning for outreach programs
Outreach Program Participants	Total number of participants served	'05-'06 = 34,303	'04-'05 = 32,255 '03-'04 = 22,465 '02-'03 = 28,835 '01-'02 = 28,803	Relative student use of outreach programs; comparative increase/decrease in student use; trends in program use

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____ **Date:** _____

Date received in Dean's Office

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Counseling Center

Program: Outreach and Consultation

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results																				
Number of program evaluations	Total number of completed Outreach Evaluation Questionnaires received	Total = 3191	'04-'05 = 3115 '03-'04 = NA '02-'03 = 3421 '01-'02 = NA	Program assessment; recommendations for improvement																				
Overall rating of outreach programs	Percentage ratings on Outreach Evaluation Questionnaire	92.6% = Excellent/good 5.0% = Satisfactory 2.0% = Fair .4% = Poor	'04-'05 = 92%, ex/good '03-'04 = 95%, ex/good '02-'03 = 96%, ex/good '01-'02 = NA	Measure of program relevance and quality; continuity of quality																				
Program utility for participants	Outreach Evaluation Question – “The content of this program was useful to me.”	74% = Yes 23% = Partially 2% = No	<table><tr><td></td><td>Y</td><td>P</td><td>N*</td></tr><tr><td>'04-'05 =</td><td>65%</td><td>33%</td><td>3%</td></tr><tr><td>'03-'04 =</td><td>NA</td><td></td><td></td></tr><tr><td>'02-'03 =</td><td>65%</td><td>30%</td><td>5%</td></tr><tr><td>'01-'02 =</td><td>NA</td><td></td><td></td></tr></table> *Y= Yes, P = Partially, N= No		Y	P	N*	'04-'05 =	65%	33%	3%	'03-'04 =	NA			'02-'03 =	65%	30%	5%	'01-'02 =	NA			Evaluation of program content; program improvement
	Y	P	N*																					
'04-'05 =	65%	33%	3%																					
'03-'04 =	NA																							
'02-'03 =	65%	30%	5%																					
'01-'02 =	NA																							

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____ Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Outreach and Consultation

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Staff generated consultations	Total number of consultations provided in various formats	<p>'05-'06 data</p> <ul style="list-style-type: none"> • 58 faculty/staff consultations • 27 faculty/staff training seminars • 25 media interviews • 21 panel discussions • 34 resource fairs • 7 trauma response activities • 74 screenings (alcohol, eating disorders, etc.) • 28 university-wide programming activities <p>Total = 274</p>	Previous data not available in this format	Measurement of time needed and the level of services requested in providing ample coverage for faculty/staff concerns in reference to students; provision of accurate information for students on campus; measurement of resources needed in responding to the media, etc.

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Outreach and Consultation

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Outreach Programs -- Student Retention Data -- New questions added to the Outreach Evaluation Questionnaire for 2005-06	Direct participant responses to questions. I left the program: <ul style="list-style-type: none"> Knowing more about topic Feeling more prepared to manage issues This program helped me: <ul style="list-style-type: none"> Reach my academic goals Enhance my BSU experience 	Outreach Evaluation Total N = 3191 70% yes; 26% partially, 4% no. 64% yes; 30% partially, 6% no. 36% yes, 41% partially, 23% no. 46% yes, 37% partially, 17% no.	No comparative data is available.	Helps in compiling data about student retention and engagement in the BSU experience

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Training Programs – Pre-doctoral Interns

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of services from pre-doctoral interns	Total accounting of services provided. The current intern class (2005-06) is in the middle of the internship year. The three interns were selected from 61 applicants. A summary of their data will be available for the '06-'07 annual report	Hours In progress	Total Hours by category: 2004-05 1642 = Direct Service 1134 = Clinical Contact 366= Supervision of MA's 152 = Outreach (hours) 140 = Outreach programs 2003-04 1663 = Direct Service 1149 = Clinical Contact 369 = Supervision of MAs 146 = Outreach (hours) 116 = Outreach programs	Monitor the requirements of the full-time experience in accordance with national expectations; monitor requirements of the American Psychological Association; monitor each intern's contribution to the various programs (clinical and outreach) of the Counseling Center; measure growth of the total internship program; etc.

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Counseling Center

Program: Training Programs – Pre-doctoral Interns

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of services from pre-doctoral interns – Continued from previous page	As above	As above	Total Hours by category: 2002-03 1564 = Direct Service 995 = Clinical Contact 359 = Supervision of MAs 210 = Outreach (hours) 166 = Outreach programs 2001-02 1576 = Direct Service 916 = Clinical Contact 475 = Supervision of MAs 186 = Outreach (hours) 89 = Outreach programs	As above

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____ Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Training Programs – MA Interns

Directions:

1. list the outcomes assessed;
6. List the assessment method used;
7. Report the evidence collected;
8. Describe how this data compares to previous assessments;
9. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of services from Masters Interns	<p>Total accounting of services provided by Masters level interns.</p> <p>MA interns are BSU students who are required to do an intensive nine month long internship experience. Students who intern in the Counseling Center are enrolled in one of two programs – Masters in Counseling (Department of Counseling Psychology and Guidance) or Masters in Clinical Psychology (Department of Psychological Sciences)</p>	<p>2005-06 Hours per category:</p> <p>357 = All Intakes 1059 = Indiv. Counseling 116 = Group Counseling 508 = Outreach 456 = Indiv. Supervision</p> <p>2070 = Tot. Direct Service</p>	<p>2004-05 Hours per category:</p> <p>332 = All Intakes 1125 = Indiv. Counseling 166 = Group Counseling 729 = Outreach 443 = Indiv. Supervision</p> <p>2291 = Tot. Direct Service</p>	<p>Monitor the requirements of the 900 hour CPsy experience in accordance with counselor certification; monitor each intern's contribution to the various programs (clinical and outreach) of the Counseling Center; measure growth of the total internship program; etc</p>

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Training Program – Doctoral Practicum

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of Services from Doctoral Practicum Students	<p>Total accounting of services provided by doctoral practicum students.</p> <p>Students from the doctoral program in the Department of Counseling Psychology receive intensive practicum experience through the Counseling Center. These students are supervised by professional staff but also provide valuable clinical and outreach services through the Center.</p>	<p>2005-06 Hours per category:</p> <p>141 = All Intakes 519 = Indiv. Counseling 300 = Outreach 1 hr/wk = Indiv. Sup'vision</p> <p>960 = Tot. Direct Service</p>	Reportable data for comparable hours varies according to the number of practicum students who work in the Center each semester.	Monitor the Counseling Center requirements for doctoral practicum students who participate in the practicum; feedback and evaluation of students; accounting for clinical hours generated in preparation for internship; measure growth of the total practicum experience

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Counseling Center

Program: Clinical Services

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Individual Counseling	Total accounting of the hours spent in providing individual counseling	2005-06 = 3002*	2004-05 = 4199 2003-04 = 3669 2002-03 = 3330 2001-02 = 3438	Program evaluation; establishing data on the ongoing and/or changing needs in service requirements; understanding of the growth of clinical programs; understanding of the use of Counseling Center resources
Psychiatric Consultation	Total accounting of the hours of psychiatric services provided to students	2005-06 = 437*	2004-05 = 404 2003-04 = 296 2002-03 = 298 2001-02 = 246	
Psychiatric Consultation hours provided by Health Center staff	Total accounting of referrals to the Health Center	2005-06 = 112*	2004-05 = 156 2003-04 = 239 2002-03 = 151 2001-02 = 281	
		*Incomplete total -- Data collected through 3/31/06 only.		

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Clinical Services

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Group Screening/ Intakes	Total accounting of hours spent in clearing clients for participation in group therapy	2005-06 = 33*	2004-05 = 103 2003-04 = 62 2002-03 = 26 2001-02 = 31	Program evaluation; establishing data on the ongoing and/or changing needs in service requirements; understanding of the growth of clinical programs; understanding of the use of Counseling Center resources
Group Counseling Hours	Total accounting of individual contacts for students seen in group treatment	2005-06 = 414*	2004-05 = 691 2003-04 = 437 2002-03 = 233 2001-02 = 506	
Suicide Tracking Cases	Accounting of the numbers of students seen and identified as having suicide potential	2005-06 = 326* *Incomplete total – Data collected through 3/31/06 only.	New program – no comparative data available	

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____ Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Clinical Services

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Critical Incident Response Team (CIRT) mandated two session assessments	Total accounting of the number of CIRT students seen in the Counseling Center	2005-06 = 73*	New program – no comparative data available	Monitor the appropriateness of treatment provided for seriously at-risk students; provide appropriate level of expertise for treatment; provide appropriate feedback for parents and administrators as required by law
Crisis/Emergency Consultations	Total of all crisis/emergency contacts including after hours calls	2005-06 = 212* *Incomplete total -- Data collected through 3/31/06 only.	2004-05 = 244 2003-04 = 207 2002-03 = 178 2001-02 = 159	Assessment of need for crisis and emergency services for students; assessment of the need for hospitalization, etc.

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Clinical Services

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Crisis/Emergency Intakes	Total number of students seen on crisis/emergency intake (immediate intake due to seriousness)	2005-06 = 225*	2004-05 = 163 2003-04 = 164 2002-03 = 131 2001-02 = 139	Assessment of need for crisis and emergency services for students; assessment of the need for hospitalization; provide appropriate level of skill and training to meet the needs of students.
Regular Intakes	Total number of students seen for regular intake	2005-06 = 745*	2004-05 = 915 2003-04 = 861 2002-03 = 830 2001-02 = 855	
Faculty/Staff Intakes and/or Consultations	Total number of faculty/staff requesting either intake or consultation	2005-06 = 9* Total intakes = 970* Total clinical services hours generated = 5579* *Incomplete data	Not available	

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Counseling Center

Program: Clinical Services – Client Satisfaction

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Client satisfaction with individual therapy	<p>Client Satisfaction Questionnaire</p> <p>During Spring Semester, 2006 this questionnaire was administered online for the first time. It was expected that the online version would provide a higher response rate. Also, as a result of previous client satisfaction data, several new items were included. The results of several critical items are provided here.</p>	<p>2005-06 data Question: "In general, how satisfied are you with your counseling experience?"</p> <p>Fall Semester: Mod to completely satisfied = 95% Mod dissatisfied = 5%</p> <p>Spring Semester: Mod to completely satisfied = 95.4% Mod dissatisfied = 4.6%</p>	<p>2004-05 data Fall Semester: Mod to completely satisfied = 95.6% Mod dissatisfied = 4.4%</p> <p>Spring Semester: Mod to completely satisfied = 98% Mod dissatisfied = 2%</p> <p>2003-04 data Fall = Not available Spring Semester: Mod to completely satisfied = 96.8% Mod dissatisfied = 3.4%</p>	Assessment of the impact of counseling for students; program improvement

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____ **Date:** _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Clinical Services – Client Satisfaction

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Client satisfaction with individual therapy	Client Satisfaction Questionnaire	<p>2005-06 data Question: "Has your counseling experience helped you to stay in school?"</p> <p>Fall Semester: Yes = 33% Not a concern = 65%</p> <p>Spring Semester: Yes = 34% Not a concern = 61%</p> <p>Of the students who indicated that staying in school was a concern, over 90% indicated that their counseling experiences helped them stay in school.</p>	<p>2004-05 data Fall Semester: Yes = 31% Not a concern = 65%</p> <p>Spring Semester: Yes = 35% Not a concern = 64%</p> <p>2003-04 data Fall = Not available Spring Semester: Yes = 35% Not a concern = 62%</p>	Assessment of the impact of counseling for students; program improvement

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____ Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Clinical Services – Client Satisfaction

Directions:

- 6 List the outcomes assessed;
- 7 List the assessment method used;
- 8 Report the evidence collected;
- 9 Describe how this data compares to previous assessments;
- 10 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Client satisfaction with individual therapy	Client Satisfaction Questionnaire	<p>2005-06 data Question: "I feel better about myself?"</p> <p>Fall Semester: Yes = 93%</p> <p>Spring Semester: Yes = 88 %</p>	<p>2004-05 data Fall Semester: Yes = 96% Spring Semester: Yes = 97%</p> <p>2003-04 data Fall = Not available Spring Semester: Yes = 95%</p>	Assessment of the impact of counseling for students; program improvement

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: Counseling Center

Program: Clinical Services – Client Satisfaction

Directions:

- 11 List the outcomes assessed;
- 12 List the assessment method used;
- 13 Report the evidence collected;
- 14 Describe how this data compares to previous assessments;
- 15 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Client satisfaction with individual therapy	Client Satisfaction Questionnaire	<p>2005-06 data New items: "I have become more successful in meeting my academic goals." Yes = 45%</p> <p>"I have become more successful in meeting my personal goals." Yes = 83%</p>	<p>2004-05 data Fall Semester: Yes = 96% Spring Semester: Yes = 97%</p> <p>2003-04 data Fall = Not available Spring Semester: Yes = 95%</p>	Assessment of the impact of counseling for students; program improvement

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: _____

Date: _____

Date received in Dean's Office

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Counseling Center Program: Testing Programs

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Participants: Educational Testing Service – Computer Based Testing	Total participant count	'05-'06 = 2014	'04-'05 = 2313	Measurement of program use and growth; estimate of service demand
Participants: Counseling Center Clients	Total participant count	'05-'06 = 240	'04-'05 = see next	Estimate of Counseling Center use and demand; determine counseling trends in testing

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Counseling Center Program: Testing Programs

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Participants: Miscellaneous Examinations	Total participant count	'05-'06 = 183	'04-'05 = 210	Measurement of program use and growth; estimate of service demand
Participants: National Saturday Testing	Total participant count	'05-'06 = 1371	'04-'05 = 1009	Estimate of regional and state use and demand
TOTAL		4415	3532	

**2005-2006 Year End Report
Health Center**

Summary of Highlights:

- **Clinical Services** – Responded to over 16,700 patients who were seen in the Health Center since July 1, 2005. Data is incomplete and will subsequently be adjusted upward.
- **Patient Satisfaction** – See the attached addendum sheet that addresses Patient Satisfaction.
- **Class Survey** – a student survey was developed and initiated by a BSU public relations class. The survey results are included.
- **Prescriptions Filled** – The Health Center Pharmacy filled over 1960 through March, 2006.

**Assessment Form for 2005-2006
Ball State University
Division of Student Affairs**

Department: HEALTH CENTER

Program: _____

Directions:

1. List the outcomes assessed;
2. List the assessment method used;
3. Report the evidence collected;
4. Describe how this data compares to previous assessments;
5. Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
PATIENT SATISFACTION	STUDENT SURVEY	see attached	see attached	see attached
NUMBERS OF Prescriptions filled	INTERNAL TRACKING	see attached	DRAMATIC increase in # of prescriptions filled over last 2 yrs	MAINTAIN current procedures of accepting insurance
PR class survey	random survey in Atrium and classrooms	see attached	see attached	see attached

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by **May 1, 2006**.

Submitted by: Kent W Bull

Date: 4/14/06

Jim P Payne

4/28/06

Date received in Dean's Office

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Center

Program: Patients Served

Directions:

- 1 List the outcomes assessed;
- 2 List the assessment method used;
- 3 Report the evidence collected;
- 4 Describe how this data compares to previous assessments;
- 5 Describe how the results of this assessment will be used in future practice.

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Total number of patients served in the Health Center	Accounting of Health Center statistical data	<p>Data is accumulated during the fiscal year, 7/1 to 6/30. The accounting of the 2005-06 data is still in process.</p> <p>Current total of patients: 2005-06 = 16,756*</p> <p>*Partial data</p>	<p>Total patients seen:</p> <p>2004-05 = 21,385 2003-04 = 26,822 2002-03 = 27,590</p>	Program assessment; total program impact; program planning and resource utilization

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by May 1, 2006.

Submitted by: JPP

Date: 5/1/06

Date received in Dean's Office

Patients seen in the health center for this year 2005-06

July-483

Aug-1286

Sept-2179

Oct-1989

Nov-2048

Dec-1386

Jan-1748

Feb-1500

March-1777

Addendum to Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Center

Patient Satisfaction Evidence:

Student surveys distributed at random to students seen in the health center during spring semester, complete results attached.

Beginning this academic term we asked students specifically if they felt access to the health center made it easier to remain in school. Most students did not answer this question.

Comparative Data: Since February of 2003 when we began doing surveys, there has been a gradual trend downward, until Spring of 2006, when almost every parameter improved.

Use of results: I would attribute this to personal changes at the health center. Over the last 3 years we have had an ill physician whose status was in question. He did not resign until he had been off with an illness for a year. We were able to replace him in July of 2005. In early fall of 2005 a nurse practitioner left and was replaced with a physician. That physician has been able to see a substantially larger volume of patients than the nurse practitioner, and has individually generally better patient satisfaction scores. Wait times have declined with this change, and wait times have historically correlated more than any other measured parameter with overall patient satisfaction. We will use these results to justify his continued employment with the health center.

PR Class Survey:

A 400 level public relations class developed a PR campaign for the health center as a class project this spring. Part of their project involved a student survey of students chosen at random in the Atrium and in classrooms. This survey was able to target students who never use the Health Center. When compared with students surveyed who have used the Health Center, it reveals that the perception of quality of care is generally lower among those who have not used the Health Center.

There is no prior existing comparative data.

Use of results: The Health Center has budgeted for a part-time student position to develop and implement a PR campaign for the Health Center. This will use a plan developed by the class project during Spring 2006 to increase awareness among the students about the services provided and the skill set and training of the employees at the Health Center.

Kent Bullis, M.D.



4/14/06

Patients seen in the health center for this year 2005-06

July-483

Aug-1286

Sept-2179

Oct-1989

Nov-2048

Dec-1386

Jan-1748

Feb-1500

March-1777

Ball State Pharmacy Prescription Totals

<i>Month</i>	<i>2002</i>	<i>2003</i>	<i>2004</i>	<i>2005</i>	<i>2006</i>
January	N/A	793	212	1342	1800
February	N/A	541	260	2083	2166
March	N/A	494	462	1898	1705
April	N/A	719	629	1994	
May	N/A	280	210	857	
June	N/A	220	207	419	
July	N/A	174	122	335	
August	N/A	169	310	919	
September	N/A	275	1644	1952	
October	N/A	265	1723	1885	
November	N/A	230	1798	2044	
December	12	265	1266	1218	

1969

Research results:

Tallied Survey Results (Total Surveyed: 108)

1. Have you ever been to the Ball State Health Center during the 2005-2006 school year?

1-2 times: 59

3-4 times: 12

5 +: 9

None: 38

2. What is your perception of the quality of care at the Health Center?

Wait time: 4.67

Diagnosis: 3.99

Staff: 3.13

Hours: 3.66

3. How would you rank the staff?

Receptionists: 2.66

Nurses: 2.22

Doctors: 2.25

4. What times would be most convenient for you to visit the health center?

5-7 a.m.: 6

7-11 a.m.: 31

Noon-4 p.m.: 24

4-7 p.m.: 44

Other: 3

5. Gender:

Male: 15

Female: 93

6. Class

Freshman: 5

Sophomore: 32

Junior: 22

Senior: 46

Graduate: 6

Other: 2

7. Age:

18: 1

19: 10

20: 34

21: 30

22: 27

23: 7

24+: 10

8: How did you learn about the health center?

Orientation: 95

Web site: 6

Newspaper: 2

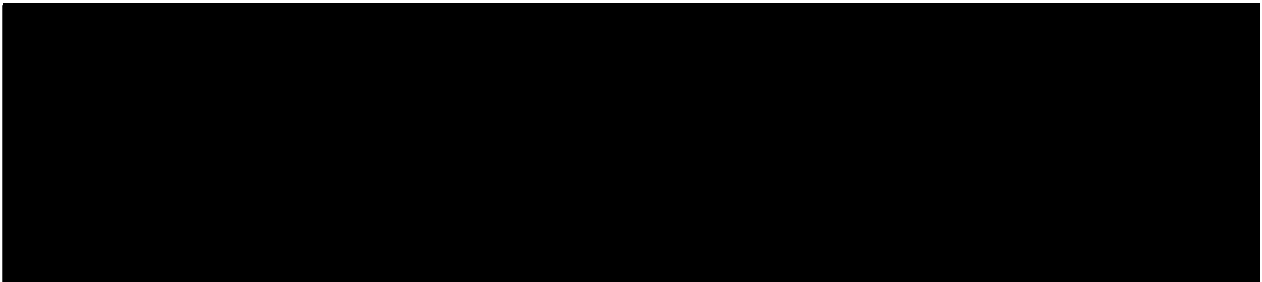
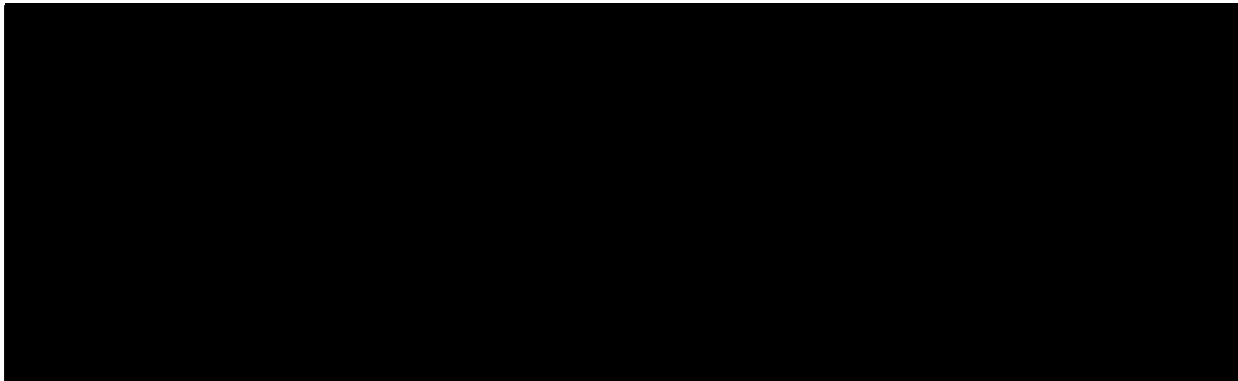
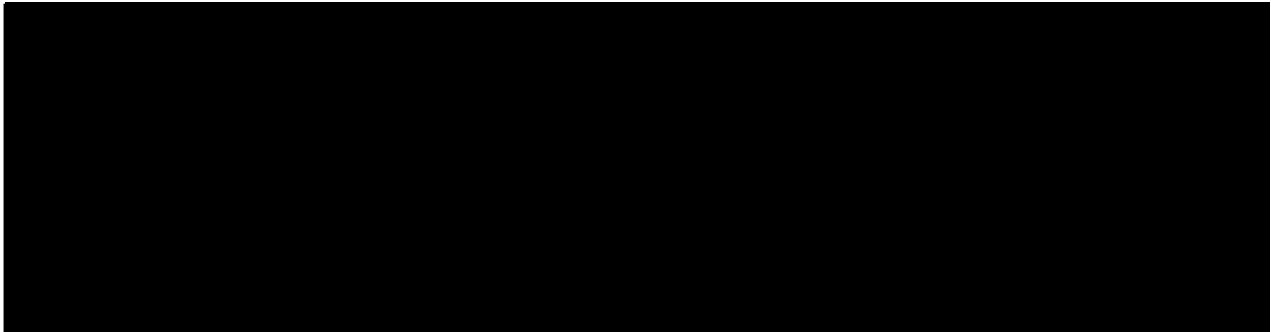
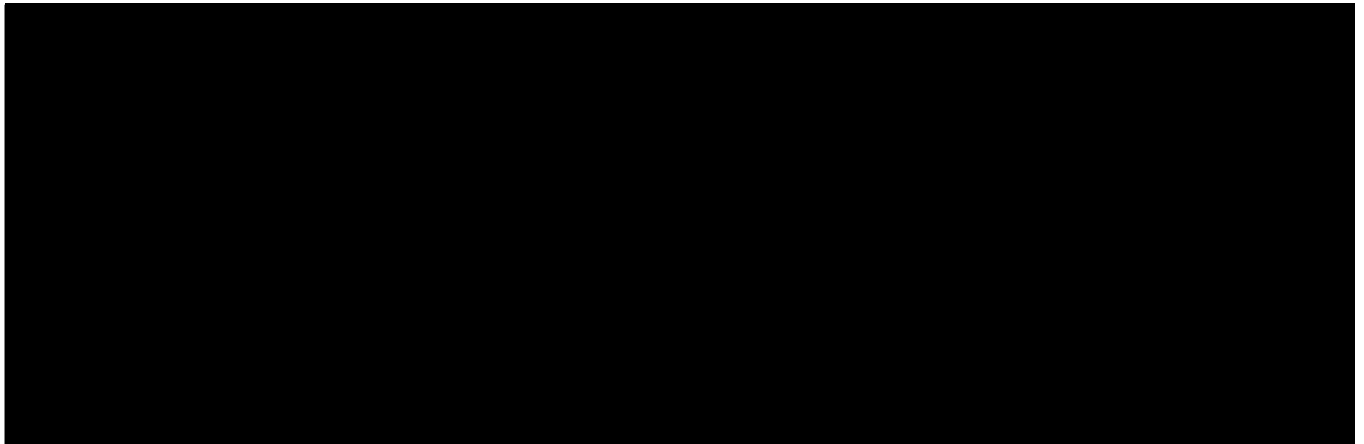
Advertisement: 0

Other: 13

9. What are some services you would like to see the health center offer?

10. Additional comments:

Meet the Team



Strategic Plan

Target Audience: Ball State University student body

Research: Primary: Survey, competitive study, Web site analysis
Secondary: Health Center Monthly Patient Satisfaction Report

Research results:

Tallied Survey Results (Total Surveyed: ###)

1. Have you ever been to the Ball State Health Center during the 2005-2006 school year?

1-2 times: 59

3-4 times: 12

5 +: 9

None: 38

2. What is your perception of the quality of care at the Health Center?

Wait time:

1: 3

2: 7

3: 11

4:

5:

6:

7:

Diagnosis:

1:

2:

3:

4:

5:

6:

7:

Staff:

1:

2:

3:

4:

5:
6:
7:

Hours:

1:
2:
3:
4:
5:
6:

Goal: To improve the reputation of the Ball State Health Center

Goal: To establish positive relationships between the Ball State Health Center and the Ball State University student body

Goal: To improve communication between the Ball State Health Center and the Ball State University student body

Problem Statement

The Ball State University Health Center (BSUHC) has a negative reputation with Ball State students due to the lack of positive relationships and communication with students. Survey results showed students gave an average score of 4.6 (out of 7) as their perception of quality care (wait time, diagnosis, staff and hours) at the BSUHC. Sixty-three percent of open-ended questions showed negative comments. Secondary research showed students who visited the BSUHC during the months of January-February 2006, ranked the quality of waiting time with an average of **58.43** percent. Students lacking awareness of the services offered also appeared to be a problem.

Situation Analysis

Information gathered by Stephen L. Beckley & Associates, Inc. in a 2003 study comparing the University of Toledo Student Health Program to others of similar size (University of Akron, Ball State University, Bowling Green State University, State University of New York at Buffalo, University of Cincinnati, Metropolitan State College of Denver, Northern Illinois University, Old Dominion University, University of Wisconsin-Milwaukee and Youngstown State University) showed the following results:

Services offered

In terms of services offered, the BSUHC is competitive. The BSUHC, among others, offers primary and urgent health care, a women's clinic, allergy immunizations, sports

medicine treatment, an on-site pharmacy, physical therapy, health education and immunization administration. Competing universities offer orthopedic care, OB/GYN services, psychiatry, infectious disease services, dermatology, dental, optometry and radiology services.

Staff

The BSUHC ranked second in the number of providers, RNs, LPNs, MAs and social workers per 10,000 students with 9.3; however, in terms of total staff, the BSUHC fell into the average range with 13.1 staff members per 10,000 students.

Hours

The BSUHC holds similar hours to the other universities studied. While the BSUHC stayed open slightly later on weekdays than other universities, the Saturday hours were shorter than other university's.

Health fee

The BSUHC was one of six universities to charge students a health fee per semester. Of these six universities, BSUHC was the second highest at \$60 per student per semester (the highest being \$80 per student per semester and the lowest being \$17 per student per semester).

A team of senior public relations majors at Ball State in the sequence capstone course, public relations campaigns, gathered the following information.

Web site

Six of the 10 university's studied had links to the health center Web site off the university's current student's page.

Goal: To improve the reputation of the Ball State University Health Center

Target audience: Ball State University student body

Objective: To create positive reinforcement of the health center by May 2007

Strategy: Publicity campaign featuring myths/facts

Tactic: Monthly poster campaign

Tactic: Monthly mass e-mail

Tactic: Daily News campaign

Tactic: Monthly competition to "debunk" myths featured on Web site with prize

Tactic: Redesign brochure to list services, confidentiality precautions and brief description of the health center process

Tactic: Sponsor a "health awareness week" on campus during the month of November

Evaluation: Distribute survey in April 2007 to measure the impact of the campaign

Tactic Descriptions

Monthly poster campaign

Description: Each month, for one year, a poster will be featured around campus listing a myth about Ball State University's Health Center and then a fact "debunking" that myth. The posters will be brightly colored and fun to draw attention to the sign and will be a fun way to promote positive reinforcement to the target audience that the BSUHC has an improved reputation.

Justification: Helps promote visual positive reinforcement around campus.

Monthly mass e-mail

Description: In the monthly mass e-mail sent to students, there will be a link to the Health Center's Web site where students will be able to "debunk" or figure out the fact behind the monthly myth. If the student is right in correcting the myth, he or she will then be entered into that month's drawing for a prize. (Gift card, DVD player, free food, etc.)

Justification: This will help attract the target audience's attention to the Health Center's improved Web site.

Daily News campaign

Description: By getting positive placements in the media, the Health Center can reach it's audiences with ease. Pitch story ideas to various forms of mediums to have feature stories about the Health Center.

Suggested topics:

- Preventing the flu
- Should you get a flu shot? the pros/cons
- "Bugs"/ viruses... how to avoid them
- Living in close quarters
- Public restrooms-- the gross facts on how dirty they are and ways to keep clean
- Eating healthy on campus
- Diet meals (Lean Cuisines) which are good, which aren't?

Justification: By getting placements in the most visible form of media for Ball State students, the Health Center can get good publicity to promote their center. We listed several topics that could be pitched to the Daily News that have the potential to get front page placement with will create positive reinforcement to the students.

Monthly competition to “debunk” myths featured on Web site with prize

Description: In the monthly mass e-mail sent to students, there will be a link to the Health Center’s Web site where students will be able to “debunk” or figure out the fact behind the monthly myth. If the student is right in correcting the myth, he or she will then be entered into that month’s drawing for a prize. (Gift card, DVD player, free food, etc.) Prizes could be donations by local businesses or purchased by the Health Center if donations are not available.

Justification: This will help attract the target audience’s attention to the Health Center’s improved Web site.

Suggested myths for poster campaign/Web site competition:

- 1) The staff at the Health Center are not qualified
- 2) The Health Center prescribes drugs that are not needed
- 3) The wait time is incredibly long
- 4) The Health Center misdiagnosis everything
- 5) The Health Center staff doesn’t care about your well-being
- 6) If you are a woman, the Health Center always assumes you are pregnant
- 7) The Health Center staff does not give you a full examination
- 8) The free condoms at the Health Center are too small
- 9) The Health Center doesn’t pay attention to your medical records
- 10) The Health Center is the “Death Center”
- 11) The Health Center uses scare tactics when dealing with patients
- 12) The Health Center does not respect patients
- 13) The Health Center assumes you have an STD
- 14) The Health Center treats you like a child
- 15) The Health Center doesn’t really care about my health
- 16) The Health Center is too expensive
- 17) The Health Center isn’t confidential
- 18) The Health Center doctors will assume I’m on drugs

Redesigned brochure to list services, confidentiality precautions and brief description of the health center process

Description: The redesigned brochure will list and expand in more detail the services offered by the Health Center. It will also elaborate on the confidentially services that are practiced by the Health Center. The brochure will also have a description of the Health Center process such as hours, web site address and directions to the center.

Justification: Gives a more detailed explanation of the Health Center in general and reinforces the positive aspects of the health center’s services, staff and business.

Sponsor a “health awareness week” on campus during the month of November

Description: The "health awareness week" will be a weeklong event focusing on Ball State University's Health Center and it's relationship with the students. It will feature events such as a health center staff question and answer session with the students, feature a key-note speaker, nutrition night with healthy ways to eat while on campus, trivia contest, event focusing on cold and flu season with helpful hints on how to prevent getting sick, etc. A relationship with BSU Rec could be established to offer fitness classes at no charge.

Suggested Health Awareness Week Activities

Monday: Sex Education

- *Condom Bingo
- *STD Trivia Game
- *Q & A with a Sex Doctor (Ex: Dr. Drew)
- *Related Services Offered
- *Free HIV Testing

Tuesday: Cold & Flu Season

- *Set up booth in central location to distribute free cough drops and mini tissue packets
- *Prevention information
- *When should you go to the Health Center?
- *Signs to look for
- *To-Do when you're sick to help you feel better (Ex: drink lots of liquids)
- *Myth and Fact Game

Wednesday: Women's Health Day

- *Women's Health Services
- *Women's Health Speaker
- *Helpful hints for that time of the month

Thursday: Health Center Activity Day

- *Obstacle course
- *Informational booths

Friday: End of Health Awareness Celebration

- *Blood Drive
- *Jeopardy Trivia Game with Prizes
- *Keynote Speaker
- *Drawing for Prizes
- *Refreshments – Health Center Open-House (Meet & Greet)
- *Healthy Living Fair

Media Advisory

Ball State University's Health Center will be sponsoring Health Awareness Week Monday, November 13, 2006 through Friday, November 17, 2006. The weeklong event will focus on the Health Center and the services provided through the university. Each day will focus on a different topic ranging from Sex Education to Cold and Flu Season and will include events such as speakers, trivia games, a blood drive and free HIV testing.

WHO: Ball State University's Health Center

WHAT: Health Awareness Week

WHEN: Monday, November 13 through Friday, November 17, 2006

WHERE: Various locations on Ball State University's Campus (specific locations to be announced at a later date)

Justification: The "health awareness week" will be featured in November, at the height of cold and flu season. It is a chance for the health center staff to connect with the students and will help reinforce a positive view of their business, services and staff.

Goal: To establish positive relationships between the Ball State University Health Center and the Ball State student body.

Target audience: Ball State University student body

Objective: To reach out 60% of Ball State student body by May 2007

Strategy: A viral marketing campaign

Tactic: Host event for student organization leaders to meet health center staff

Tactic: Present to core classes

Tactic: Present to student athletes and coaches at required semester meetings

Evaluation: Distribute survey in April 2007 to measure the impact of the campaign

Tactic Descriptions

Host an event for student organization leaders to meet the health center staff

Description: An informal event offering pizza late in a Tuesday or Thursday afternoon would be best to encourage participation from student leaders. At this event, the health center staff could mingle and introduce themselves to the student leaders- this would allow the student leaders to become familiar with them and give them a familiar face or name to give their membership when attending the health center. A question and answer session, led by Dr. Bullis would allow student leaders the chance to ask questions and learn of the services offered.

Justification: Hosting an event with student organization leaders is one of the simplest ways of reaching a great number of the student body. Student organization leaders are always looking out for their members and offering advice. Reaching out and informing the leadership of the 300+ student organizations Ball State offers could greatly influence the reputation of the health center.

Present to core classes

Description: A short presentation to core classes and distribution of the brochure.

Justification: Every Ball State student has to take core classes at some time. Presenting to core classes is another simple way of reaching a majority of Ball State students. Distributing the re-designed brochure is a nice leave behind for students to share with friends, roommates or keep for future reference.

Present to athletes and coaches at required semester meetings

Description: Every Ball State athlete, coach and athletic trainer is required to attend a meeting each semester. This presentation could be arranged through the athletic director's office.

Justification: Presenting to this group would be greatly valuable as these students experience tremendous amounts of stress managing class, practice schedules and coaches' pressures. The stress placed on these students causes them to be vulnerable to sickness easier than some other students. The coaches and athletic trainers see these students daily and have an influence on the athlete's health decisions.

Goal: To improve communication between the Ball State University Health Center and the Ball State University student body.

Target audience: Ball State University student body

Objective: To open three additional channels of communication by May 2007

Strategy: Create communication channels

Tactic: Redesign Web site to provide more information and allow students easier access to the information they're searching for

Web site content possibilities:

- Illness signs/symptoms
- Questions to decide if a health center visit is necessary
- Common illnesses/viruses on campus
- Bios/photos of each staff member
- Forum board
- Electronic anonymous suggestion/comment box
- Detailed explanation of each service offered, reasons for needing it
- Relationship with Ball Memorial Hospital
- Updated wait times

Tactic: Host an open forum each semester

Tactic: Establish a "health hotline"

Evaluation: Distribute survey in April 2007 to measure the impact of the campaign

Tactic Descriptions

Redesigning the Web site

Description: To create a beneficial communication channel between Ball State students and the Health Center via their web site. There needs to be an enhanced process for information to be decimated by Ball State students. Several ideas for the website that can and will improve communications between Ball State students and the Health Center are:

- Illness signs/symptoms – Create a list of signs/symptoms that Ball State students can virtually "check" to lead them through a process of questions with an eventual preliminary diagnosis.
- Questions to decide if a Health Center visit to the Health Center is necessary – Create a list of yes or no questions to determine if a visit is necessary or if the visit is urgent.
- Common illnesses/viruses on campus – Create a "Top 10" list that explores the top 10 illnesses/viruses that are present during a school year at Ball State.
- Biographies/photos of each Health Center staff member – Create biographies and a current, consistently dressed, photo of each Health Center staff member. Include in biographies education, experience and anything that may have been published by staff member.
- Forum board – Create a virtual forum board that students can regularly access to talk with other students, Ball State medical students and/or Health Center staff members.
- Electronic anonymous suggestion/comment box – Create a virtual suggestion/comment box that Ball State students can access and complete whenever they deem necessary.
- Detailed explanation of each Health Center service offered – Create a short, but direct description about *each* service that the Health Center offers. Also include a bullet list of when Ball State students can utilize the services offered.

- Relationship with Ball Memorial Hospital – Create a page that explains in detail the relationship and its history to Ball Memorial Hospital.
- Updated wait time – Revise wait time posted on web site and constantly and precisely update every 30 minutes during office hours. When office is closed, including weekends, make sure to deactivate any posted wait time.

Justification:

- Illness signs/symptoms – When students utilize this resource, it can and will make the students aware of the possible ailment they have and discover what the next step for healing is.
- Questions to decide if Health Center visit is necessary – By utilizing this, students can discover if their ailment(s) require a visit to the Health Center; therefore, students who truly require urgent care do not have as long of a wait time and staff members are not losing valuable time on minor conditions.
- Common illnesses/viruses on campus – By creating a Top 10 list of common illnesses/viruses, students can educate themselves on the most probable illness/virus that they could possibly contract during any given school year.
- Biographies/photos of each Health Center staff member – By creating this web page, the Health Center immediately draws credibility to each staff member. Each staff member has spent numerous years in school to get to where they are today and they should be proud to display their education and experience in the health field. The page should also display anything that the staff member has had published because again, it adds credibility to the Health Center as well as Ball State in general. There also needs to be an updated photograph of each staff posted along with their biography. This is necessary because it gives students the ability to place staff member's faces with names, thus creating a sense of trust. This page needs to be frequently updated with any staff changes that are made at the Health Center.
- Forum board – By creating a forum board (i.e. message board), students can post their problems, questions, experiences and/or complaints that they have regarding the Health Center. By giving staff members the access to answer or comment on any of these posts, gives the Health Center the power to squelch any rumors that could be dawning. By utilizing Ball State medical students on the forum board, there is a communication channel that is opened for Ball State students and those students who are practicing to become medical professionals. It is also easier for Ball State students to directly relate to those closer in age.
- Electronic anonymous suggestion/comment box – By creating an anonymous suggestion/comment box for Ball State students, the Health Center can address and correct any problems that could potentially cause distrust from Ball State students in the future. It is also a medium to receive positive feedback from Ball State students who feel that the care they received at the Health Center was excellent and just did not have a way to voice their satisfaction. This is simply a way of opening the communication channel enourmosly between Ball State students and the Health Center.
- Detailed explanation of each Health Center service offered – By creating this page, there will never be any doubt of what the Health Center offers to Ball State

- students on a regular basis. There are many services that the Health Center offers, but these services are not being communicated to the students so they can utilize them. The services should be listed with a short and direct description of the service so the student does not get overwhelmed by the amount of text on the page.
- Relationship with Ball Memorial Hospital – Many Ball State students are unaware of the fact that the Health Center is operated by one of the nation's most premier hospitals. By emphasizing this relationship, Ball State parents will feel that they can trust the diagnosis that is given by the staff members; therefore, building an extensive and very important perception of credibility.
- Updated wait time – Revising the current method of posting the "current wait time" on the web site and keeping it updated every 30 minutes during office hours builds a sense of compassion. When students are sick and need to get into the Health Center, they do not want to wait in a waiting room for an extended period of time. If the wait time is kept updated frequently, then students can determine by the wait time whether or not they need to visit the Health Center at that given time. Also, the wait time should be posted as "closed" during hours when the office is not open so as not to confuse students who are unaware of office hours. This all communicates to the students that the Health Center cares about their valuable time and also gives Health Center staff members the luxury of not being crunched for time, like when the Health Center is packed with students.

Open Forum

Description: To improve communication with Ball State students, there should be a method of direct communication. We believe that the best method to achieve this would be to hold a forum once a semester for Ball State students to attend. To be credible, we believe that the Health Center Director, Kent Bullis, Practice Supervisor, Lisa Kennedy, two active doctors and two active nurse practitioners should all be present.

Justification: This is a way for the Health Center to be in control of any problems or rumors that are active within the student body at Ball State. Also, this exhibits a sense of concern from the Health Center to the students that the Health Center cares enough about the perception of the students, to host this forum once a semester. By featuring Health Center Director, Kent Bullis, Practice Supervisor, Lisa Kennedy, two active doctors and two active nurse practitioners, the Health Center will extrude professionalism and credibility.

LIST OF Q & A WITH DIRTY QUESTIONS AND CLEAN ANSWERS

Health Hotline Tactic

Description: Another method to opening a medium for communication between Ball State students and the Health Center is to establish a health hotline. The Health Center will open a telephone line that can be utilized by Ball State students during regular Health Center office hours. Professional staff members and Ball State medical students can be on the receiving end of the hotline for a minimum of two hours a day to answer any questions that Ball State students may have regarding any illness or injury that they are experiencing. They can also serve as a method of advice for students if they are facing a medical dilemma.

Justification: By creating this medium for students to regularly access, it will cut down on the wait time for other at the Health Center. It will also open up each staff members schedule so they can spend longer amounts of time with each Ball State student and patient and to alleviate extended wait times. This also builds a relationship between staff members and Ball State medical students to the students at Ball State. This relationship will also lead to trust in the advice and diagnosis from the Health Center.

January 2007

- Poster campaign: Myth/fact #4
- Create e-mail to go to student body with correlating topic as pitched to the Daily News
- Select myth for Web site contest- promote competition and prizes
- Host student organization leader event
- Begin planning open forum

February 2007

- Poster campaign: Myth/fact #5
 - Create e-mail to go to student body with correlating topic as pitched to the Daily News
 - Select myth for Web site contest- promote competition and prizes
 - Present to core classes
 - Continue planning open forum & promote
 - Begin establishing Health Hotline

March 2007

- Poster campaign: Myth/fact #6
 - Create first e-mail to go to student body with correlating topic as pitched to the Daily News
 - Select myth for Web site contest- promote competition and prizes
 - Present to student athletes
 - Host open forum
 - Health Hotline functioning by end of March
 - Create survey to evaluate success of health center campaign

April 2007

- Poster campaign: Final myth/fact
 - Create e-mail to go to student body with correlating topic as pitched to the Daily News
 - Select myth for Web site contest- promote competition and prizes
 - Update 2007-2008 intern job description
 - Distribute survey to evaluate success of health center campaign

Intern Job Description

Job Description:

Implement strategic plan for Ball State University's Health Center. Work will include event planning, media relations and design. For class credit and is a paid internship.

Required Qualifications:

Must have excellent written and verbal communication skills, be dependable and able to manage a variety of projects. Need knowledge of Microsoft Office and basic design skills and knowledge of InDesign. Ability to work with minimum supervision. Ability to meet deadlines, accuracy in writing and excellent organizational skills. Good time management skills and dedication to improving the image of Ball State University's Health Center.

Desired Qualifications:

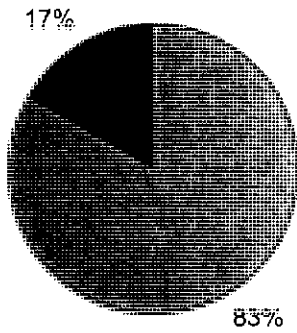
Knowledge of Microsoft Office. Basic web designing and graphic computer skills. Junior or senior status in public relations.

Contact Information:

Call the Career Center at 285-5634 to arrange an appointment to get a referral for this job.

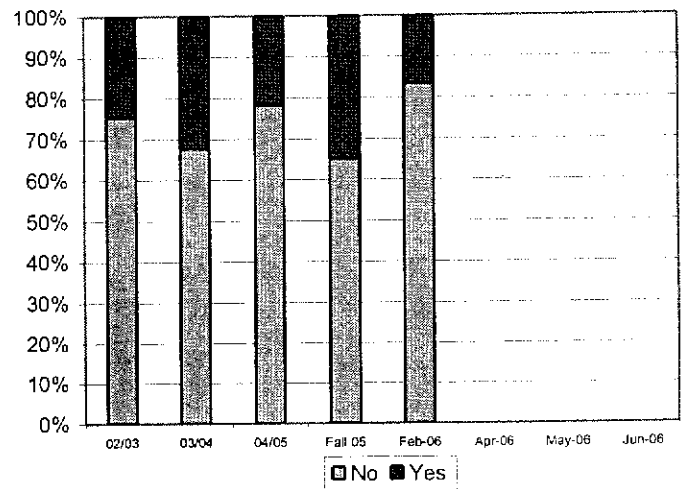
February 2006 BSU Health Center

First Visit - Current Period

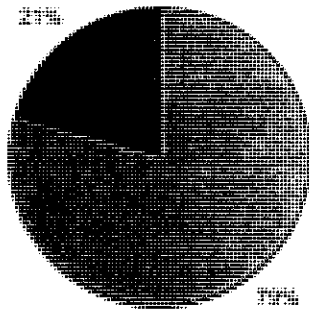


No Yes

First Visit Trend

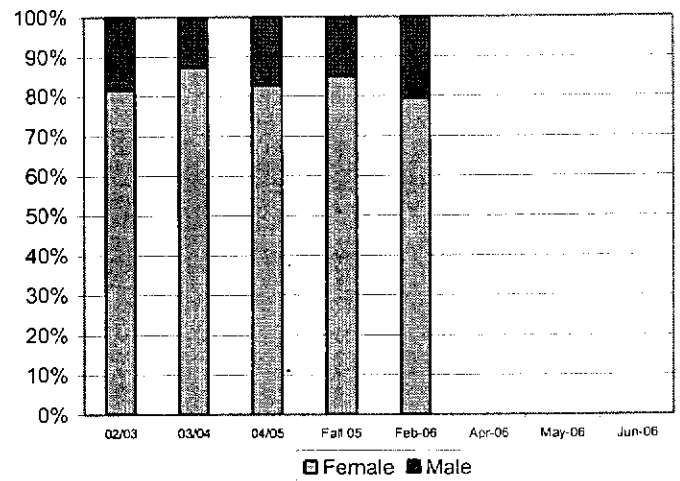


Patient Sex - Current Period

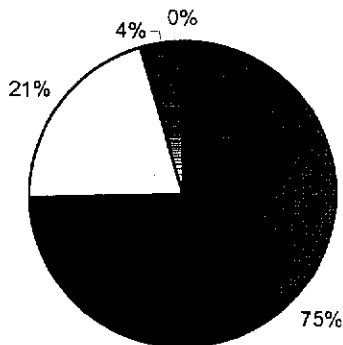


Female Male

Patient Sex Trend

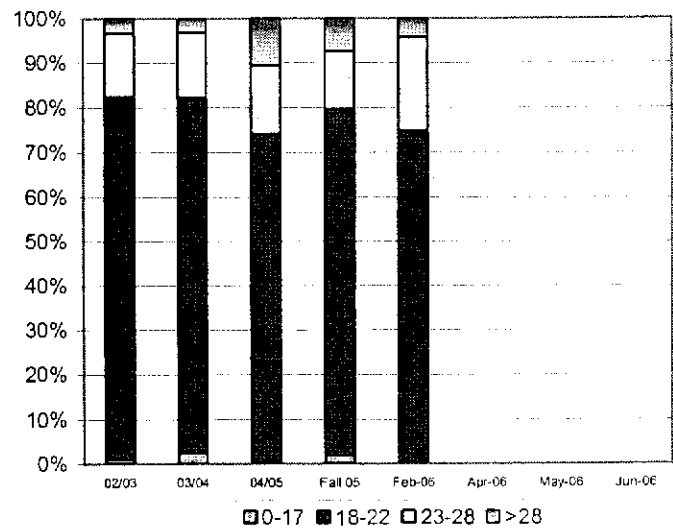


Patient Age



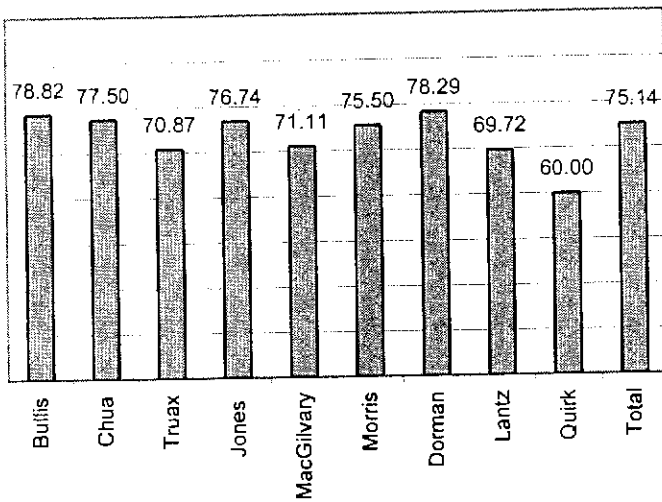
0-17 18-22 23-28 >28

Patient Age Trend

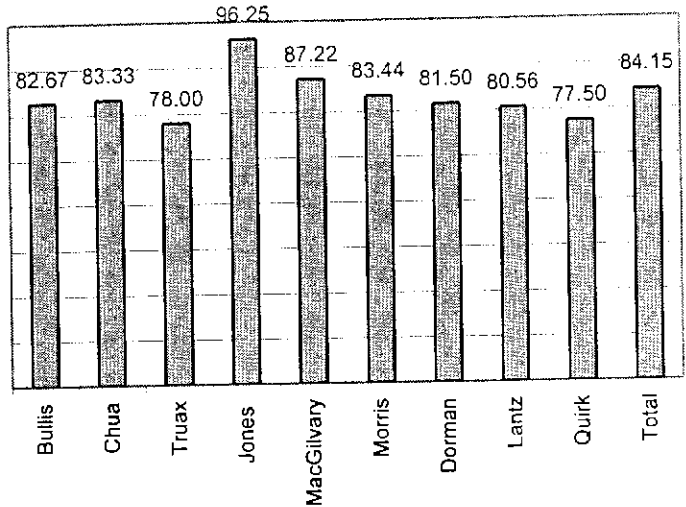


February 2006 BSU Health Center

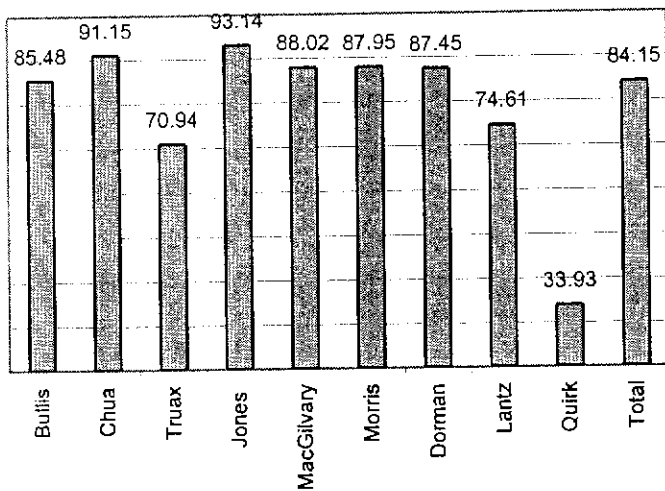
Access to Care



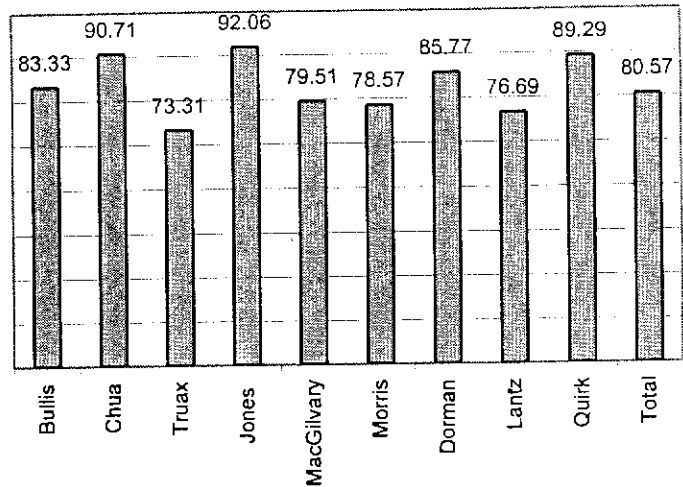
During Visit



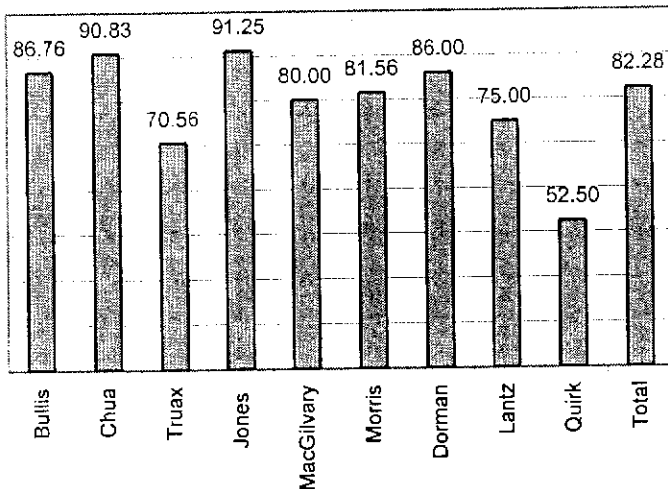
Care Provider



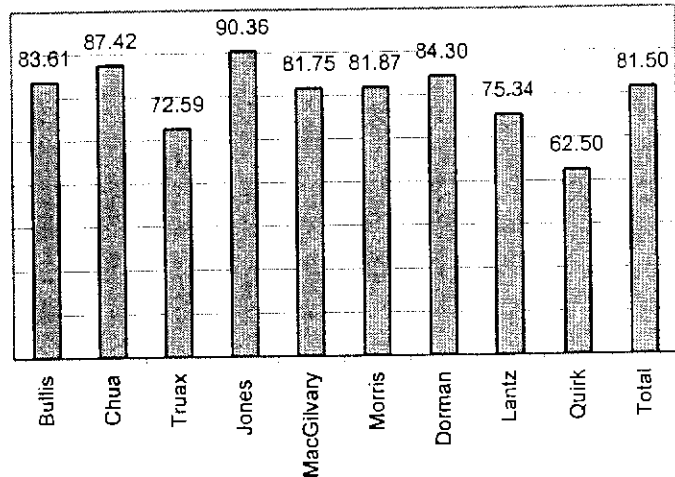
Pharmacy



Overall Assessment of Visit

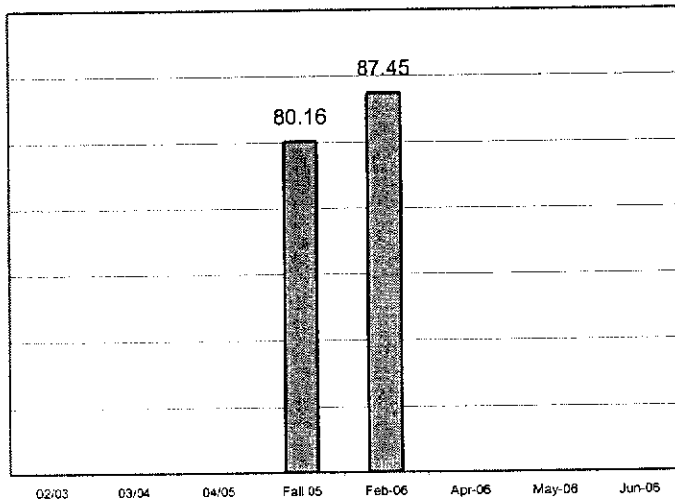


Overall Rating

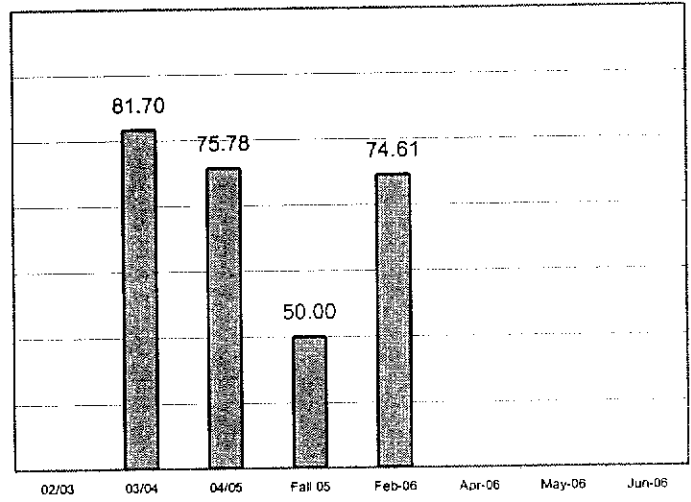


BSU Health Center Care Provider Average Score Trend

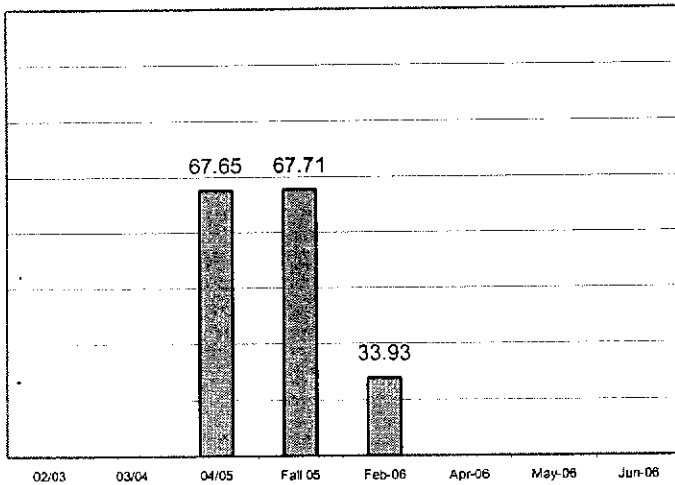
Dorman



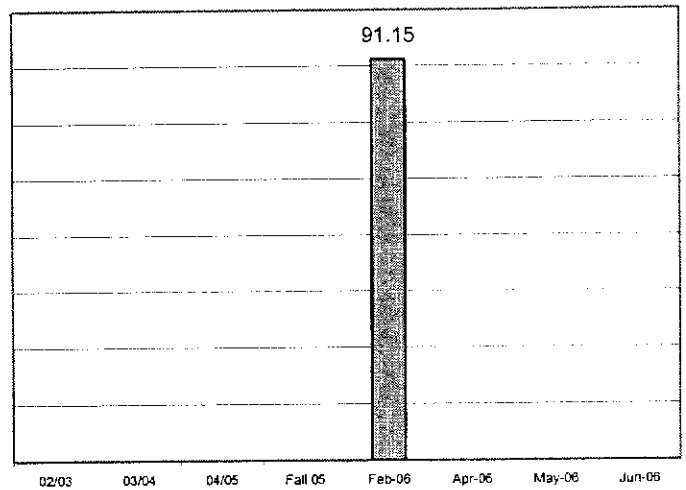
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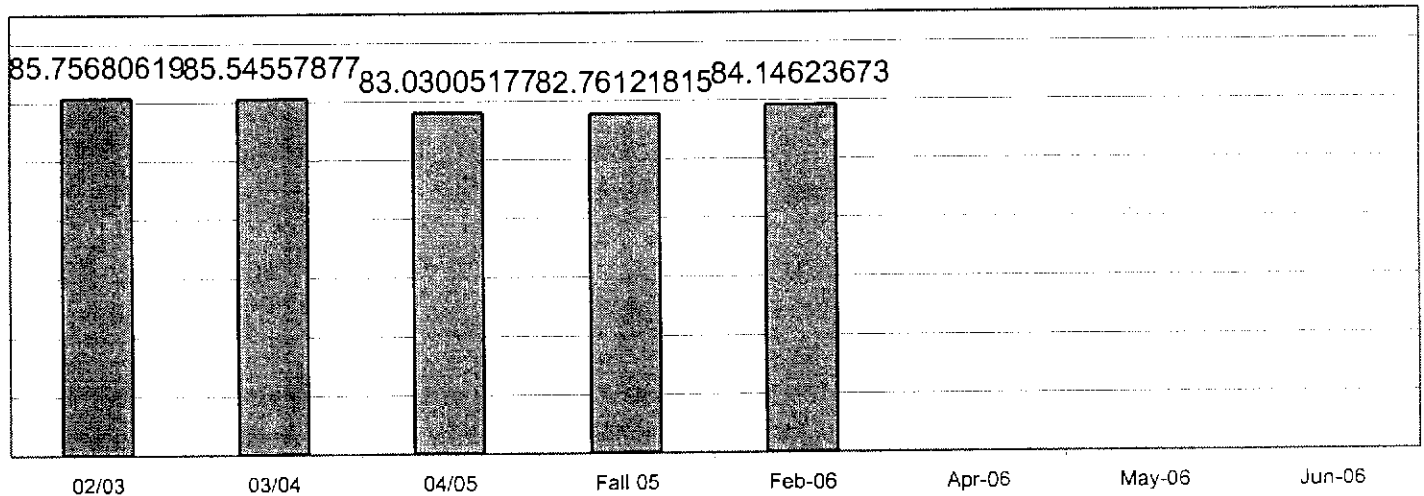
Quirk



Chua



Overall Care Provider Average Score



February 2006 BSU Health Center

Rank	Ordered Priority Index Rating	Mean Score Rank	Correlation Coefficient Rank	Priority Index
1	Overall quality of care you received	21	30	51
2	Comfort in asking everything you wanted to know	22	28	50
3	Likelihood you will recommend the Health Center to your friends	26	17	43
4	Clarity and completeness of explanations about your condition	19	23	42
5	Instructions given you about your follow up care	16	25	41
6	Your confidence in this care provider	14	26	40
7	Wait time in Pharmacy	29	10	39
8	Likelihood you would recommend this provider to others	15	24	39
9	Amount of time spent with you	9	29	38
10	Convenience of Pharmacy hours	28	9	37
11	Length of time you had to wait for appointment	30	4	34
12	Care provider's technical skills	13	21	34
13	Overall rating of Pharmacy	18	15	33
14	Respect for your privacy, dignity, and confidentiality	5	27	32
15	Helpfulness of staff on the phone	24	7	31
16	Convenience of hours	27	3	30
17	Sensitivity of Pharmacy to your needs and privacy	17	12	29
18	Ease of scheduling appointment (Women's Center)	23	5	28
19	Clarity of information given to you by Pharmacist	12	16	28
20	Courtesy of staff at front desk	25	1	26
21	Comfort and cleanliness of waiting room	20	6	26
22	Sensitivity to your needs and privacy	11	14	25
23	Clarity of information given to you about your medication	3	22	25
24	Pharmacy staff's communication skills	6	18	24
25	Courtesy of staff in Pharmacy	4	20	24
26	Likelihood you will return in the future	10	13	23
27	Care provider's personal manner	2	19	21
28	Nurse's technical skills	7	11	18
29	Nurse's personal manner	8	2	10
30	Comfort and cleanliness of exam room	1	8	9

2005-2006 Year End Report
Health Education

Summary of highlights:

- Conducted over 200 outreach programs reaching more than 7000 students.
- Administered the National College Health Assessment to a random sample of over 1000 BSU students.
- Provided universal precautions trainings to over 1,000 students to equip them for immersive field experiences.
- Provided nationally recognized substance use diversion programming to 46 students.
- In collaboration with multiple academic departments and community organizations, sponsored observances of National Collegiate Alcohol Awareness Week, Breast Cancer Awareness Month, Great American Smokeout, World AIDS Day, National Black HIV/AIDS Awareness Day, Sexual Responsibility Week, Sexual Assault Awareness Week, Eating Disorders Awareness Week, Spring Break Safety Awareness Week, and National Alcohol Screening Day to enhance student development.
- On average, 92.8% of participants reported knowing more about a topic at the conclusion of a Health Education program.
- On average, 78.1% of participants reported feeling more able to manage related issues after attending a Health Education program.
- On average, 95.1% of participants reported their overall evaluation of a Health Education program as "Good" or "Excellent."

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Education

Program: Universal Precautions Trainings

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2002-2003)	Use of Results
Total individuals trained	Participant count	1119	Data not available	Demonstrate university utilization of training
Departments utilizing training	Department count	5	Data not available	Demonstrate university utilization of training
Clarity of training content	Counseling & Health Services Outreach Program Evaluation	Clear: 100% Partially Clear: 0% Not Clear: 0%	Clear: 100% Partially Clear: 0% Not Clear: 0%	Improve presentation of material
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 94.5% Partially Relevant: 5% Not Relevant: 0.5%	Relevant: 90.5% Partially Relevant: 9.5% Not Relevant: 0%	Determine adequacy of curriculum
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Prepared: 85.7% Partially Prepared: 14.3% Not Prepared: 0%	Determine efficacy of facilitator training
Degree of interest in content	Counseling & Health Services Outreach Program Evaluation	Interesting: 92.8% Partially Interesting: 7.2% Not Interesting: 0%	Interesting: 57.1% Partially Interesting: 42.9% Not Interesting: 0%	Determine adequacy of curriculum
Motivation at beginning of outreach	Counseling & Health Services Outreach Program Evaluation	High Motivation: 48.9% Medium Motivation: 48.9% Low Motivation: 2.2%	High Motivation: 24.3% Medium Motivation: 67.6% Low Motivation: 8.1%	Determine pre-training attitudes of participants
Motivation at end of outreach	Counseling & Health Services Outreach Program Evaluation	High Motivation: 65.4% Medium Motivation: 34.1% Low Motivation: 0.5%	High Motivation: 35.7% Medium Motivation: 64.3% Low Motivation: 0%	Assess impact of training on employee attitude
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 76.9% Good: 22.5% Satisfactory: 0.6% Fair: 0% Poor: 0%	Excellent: 34.1% Good: 56.8% Satisfactory: 9.1% Fair: 0% Poor: 0%	Determine appropriateness of program

*Assessment Form for 2005-2006
Ball State University
Division of Student Affairs*

Department: Health Education

Program: Smoking Cessation Classes

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2002-2003)	Use of Results
Total number of participants	Participant count	49	36	Determine need for program
Clarity of class content	Counseling & Health Services Outreach Program Evaluation	Clear: 100% Partially Clear: 0% Not Clear: 0%	Clear: 100% Partially Clear: 0% Not Clear: 0%	Improve presentation of material
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 100% Partially Relevant: 0% Not Relevant: 0%	Relevant: 86.4% Partially Relevant: 13.6% Not Relevant:	Determine adequacy of curriculum
Preparation of facilitator	Counseling & Health Services Outreach Program Evaluation	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Prepared: 96% Partially Prepared: 4% Not Prepared: 0%	Determine efficacy of training
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 85.7% Partially Know More: 14.3% Do Not Know More: 0%	Data not available	Determine adequacy of curriculum
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 75% Partially Able to Manage Issues: 25% Not Able to Manage Issues: 0%	Data not available	Determine adequacy of curriculum
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 0% Partially Helps Reach Goals: 87.5% Doesn't Help Reach Goals: 12.5%	Data not available	Determine potential impact of program on student retention
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 25% Partially Enhanced: 75% Did Not Enhance: 0%	Data not available	Determine potential impact of program on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 100% Partially Will Change: 0% Will Not Change: 0%	Data not available	Determine adequacy of curriculum and motivational skill of facilitators
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 62.5% Good: 37.5% Satisfactory: 0% Fair: 0% Poor: 0%	Excellent: 74.2% Good: 22.5% Satisfactory: 3.3% Fair: 0% Poor: 0%	Determine appropriateness of program

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Education

Program: Weight Loss Classes

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2004-2005)	Use of Results
Total number of participants	Participant count	149	96	Determine growth of program
Clarity of class content	Counseling & Health Services Outreach Program Evaluation	Clear: 98% Partially Clear: 2% Not Clear: 0%	Clear: 96.9% Partially Clear: 3.1% Not Clear: 0%	Improve presentation of material
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 86.2% Partially Relevant: 13.8% Not Relevant: 0%	Relevant: 93.9% Partially Relevant: 6.1% Not Relevant: 0%	Determine adequacy of curriculum
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Determine which presenters to invite to lead sessions
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 93.9% Partially Know More: 6.1% Do Not Know More: 0%	Data not available	Determine adequacy of curriculum
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 100% Partially Able to Manage Issues: 0% Not Able to Manage Issues: 0%	Data not available	Determine adequacy of curriculum
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 50% Partially Helps Reach Goals: 50% Does Not Help Reach Goals: 0%	Data not available	Determine potential impact of program on student retention
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 50% Partially Enhanced: 50% Did Not Enhance: 0%	Data not available	Determine potential impact of program on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 75% Partially Will Change: 25% Will Not Change: 0%	Data not available	Determine adequacy of curriculum and motivational skill of presenter
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 56.6% Good: 32% Satisfactory: 0% Fair: 9.4% Poor: 1.8%	Excellent: 69.4% Good: 30.6% Satisfactory: 0% Fair: 0% Poor: 0%	Determine appropriateness of program

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Education

Program: Educational Presentations

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2001-2002)	Use of Results
Total number of participants	Participant count	3409	Data not available	Determine usage of outreach Services; need for marketing
Clarity of presentation content	Counseling & Health Services Outreach Program Evaluation	Clear: 94.5% Partially Clear: 5.5% Not Clear: 0%	Clear: 91.7% Partially Clear: 8.3% Not Clear: 0%	Improve presentation material as needed
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 79.7% Partially Relevant: 18.2% Not Relevant: 2.1%	Relevant: 70.3% Partially Relevant: 25.3% Not Relevant: 4.4%	Determine adequacy of presentation material
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 90% Partially Prepared: 10% Not Prepared: 0%	Prepared: 87.6% Partially Prepared: 11.2% Not Prepared: 1.2%	Determine efficacy of presenter training
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 100% Partially Know More: 0% Do Not Know More: 0%	Data not available	Determine adequacy of presentation material
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 75.9% Partially Able to Manage Issues: 24.1% Not Able to Manage Issues: 0%	Data not available	Determine adequacy of presentation material
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 41.4% Partially Helps Reach Goals: 34.5% Does Not Help Reach Goals: 24.1%	Data not available	Determine potential impact of programming on student retention
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 41.4% Partially Enhanced: 31% Did Not Enhance: 27.6%	Data not available	Determine potential impact of programming on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 44.9% Partially Will Change: 31% Will Not Change: 24.1%	Data not available	Determine adequacy of presentation material/ motivational skill of presenter
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 64.3% Good: 30.8% Satisfactory: 4.2% Fair: 0.7% Poor: 0%	Excellent: 42% Good: 44.6% Satisfactory: 8.0% Fair: 3.4% Poor: 1%	Determine appropriateness of program

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Education

Program: Condom Shoppe

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2004-2005)	Use of Results
Total number of clients	Client count	1750	1748	Determine number to purchase
Frequency of condom use	Condom Shoppe Survey	Always: 63.9% Mostly: 20.6% Sometimes: 7.9% Rarely: 5.0% Never: 2.5%	Always: 56.9% Mostly: 27.7% Sometimes: 7.7% Rarely: 6.2% Never: 1.5%	Assess health risk behaviors of students
Frequency of visits	Condom Shoppe Survey	1 Visit: 36.4% 2 Visits: 12.5% 3 Visits: 8.8% 4 Visits: 6.3% 5 Visits: 5.5% 6 or More Visits: 30.5%	1 Visit: 15.6% 2 Visits: 12.5% 3 Visits: 9.4% 4 Visits: 7.0% 5 Visits: 3.1% 6 or More Visits: 52.3%	Determine how often students utilize free condoms rather than purchasing them from local merchants
Satisfaction with selection	Condom Shoppe Survey	Always: 35.7% Mostly: 42.3% Sometimes: 14.7% Rarely: 4.8% Never: 1.8%	Always: 34.4% Mostly: 46.1% Sometimes: 15.6% Rarely: 2.3% Never: 1.6%	Determine brands and styles to keep in stock
Referrals to peers	Condom Shoppe Survey	Always: 52.3% Mostly: 23.8% Sometimes: 15.9% Rarely: 3.2% Never: 4.7%	Always: 55.5% Mostly: 24.2% Sometimes: 12.5% Rarely: 3.9% Never: 3.9%	Determine need for direct advertising versus word-of-mouth
Pregnancy impact on academic performance	NCHA Survey	Data available Fall 2006	Not applicable: 98.2% (2003); 94.1% (2000) Did not affect academics: 0.8% (2003); 4.5% (2000) Received lower grade on exam: 0.8% (2003); 0.6% (2000) Received lower grade in course: 0.3% (2003); 0.7% (2000) Received incomplete or dropped course: 0% (2003); 0% (2000)	Determine potential impact of service on student retention
STD impact on academic performance	NCHA Survey	Data available Fall 2006	Not applicable: 96.3% (2003); 95.7% (2000) Did not affect academics: 3.2% (2003); 3.7% (2000) Received lower grade on exam: 0.5% (2003); 0.4% (2000) Received lower grade in course: 0% (2003); 0.1% (2000) Received incomplete or dropped course: 0% (2003); 0.1%	Determine potential impact of service on student retention

*Assessment Form for 2005-2006
Ball State University
Division of Student Affairs*

Department: Health Education

Program: Peer Health Education

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2004-2005)	Use of Results
Total number of volunteers	Participant count	31	30	Maintain adequate volunteer force
Retention of volunteers	Participant count	46.7%	Not available	Maintain adequate volunteer force while minimizing need for trainings
Believability of volunteers	NCHA Survey	Available Fall 2006	2003: Believable: 47.2% Neither Believable nor Unbelievable: 50.9% Unbelievable: 1.8% 2000: Believable: 42.3% Neither Believable nor Unbelievable: 51.5% Unbelievable: 6.2%	Determine student perceptions of PHE credibility
Demand for PHE programming	Program request count	61	70	Determine need for marketing and for volunteer needs

*Assessment Form for 2005-2006
Ball State University
Division of Student Affairs*

Department: Health Education

Program: HIV/Syphilis Testing

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2002-2003)	Use of Results
Total number of tests	Client count	132	132	To determine staffing and supply needs
HIV infection impact on academics	NCHA Survey	Available Fall 2006	<p>2003</p> <p>Not applicable: 99.2%</p> <p>Did not affect academics: 0.5%</p> <p>Received lower grade on exam: 0%</p> <p>Received lower grade in course: 0.3%</p> <p>Received incomplete or dropped class: 0%</p> <p>2000</p> <p>Not applicable: 97.3%</p> <p>Did not affect academics: 2.5%</p> <p>Received lower grade on exam: 0%</p> <p>Received lower grade in course: 0.2%</p> <p>Received incomplete or dropped class: 0%</p>	To determine potential impact of service on student retention

Assessment Form for 2005-2006
Ball State University
Division of Student Affairs

Department: Health Education

Program: Court Offenders

Outcomes Assessed	Methods Used	Evidence (2005-2006)	Comparative Data (2001-2002)	Use of Results
Total number of participants	Attendance	46	71	Determine usage of outreach Services; need for marketing
Clarity of presentation content	Counseling & Health Services Outreach Program Evaluation ; Exit Interview	Clear: 98% Partially Clear: 1% Not Clear: 1%	Clear: 88.1% Partially Clear: 8.9% Not Clear: 3%	To maintain useful information
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 77.1% Partially Relevant: 22.8% Not Relevant: 5.1%	Relevant: 70.9% Partially Relevant: 24.8% Not Relevant: 4.3%	To make appropriate changes as needed
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 96% Partially Prepared: 4% Not Prepared: 0%	Prepared: 84.7% Partially Prepared: 14.3% Not Prepared: 1%	To be sure training is appropriate
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 91.7% Partially Know More: 7.2% Do Not Know More: 1.1%	Know More: 74.6% Partially Know More: 23.5% Do Not Know More: 1.9%	To be sure that content is up to date
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 61.4% Partially Able to Manage Issues: 36.2% Not Able to Manage Issues: 2.4%	Able to Manage Issues: 33.8 Partially Able to Manage Issues: 45.2 Not Able to Manage Issues: 21%	To change the program to aid in behavior change
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 65.8% Partially Helps Reach Goals: 27% Does Not Help Reach Goals: 7.2%	Data not available	To change the program as needed
Attitude/Behavior change	Prochaska Theory of Change	Moved upward 20 points	Moved upward 52 points	To determine positive movement On the continuum
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 64.6% Good: 27.9% Satisfactory: 7.5% Fair: 0% Poor: 0%	Excellent: 38.9% Good: 52.4% Satisfactory: 3.8% Fair: 2.9% Poor: 2%	Determine adequacy of presentation material
Facilitator comfort with training	Exit Interview	Excellent: 100%	Excellent: 100%	To change training as needed
Number of counties aided in judicial process	County of Referral	12	16	To determine marketing needs

*Assessment Form for 2005-2006
Ball State University
Division of Student Affairs*

Department: Health Education

Program: AlcoholEdu

Outcomes
Assessed

Methods
Used

Evidence
(2005-2006)

Comparative Data
(2001-2002)

Use of Results

Total number of participants

Client count

67

35

To determine growth of program

Six variables were assessed by Dr. Andrew Wall. The synopsis of his report is included.

This completed form must be submitted to your area head and to the Dean of the Division. To be included in the 2005-2006 divisional report, this form must be submitted by **May 1, 2006**.

Submitted by: Lisa Thomas

Date: 4-14-06

Date received in Dean's Office

Dear Administrator,

We are very pleased to announce that the peer review process for the first independent evaluation of AlcoholEdu® for College is complete!

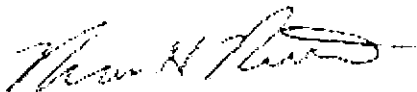
Dr. Andrew Wall at the University of Illinois at Urbana-Champaign successfully defended his dissertation, which was a rigorous evaluation of AlcoholEdu for College. His study, comprising an N of 23,127 students, compared students who completed AlcoholEdu for College with students who had not yet done so during the same timeframes throughout academic year 2003-04. His findings revealed that students who completed AlcoholEdu for College experienced ~50% fewer negative health, social, and academic consequences than students who had not yet taken the course – and that this was true at any time during the academic year.

This study represents the largest-ever evaluation of a prevention program, allowing for statistical significance in findings at the $p < .001$ level.

Dr. Wall is presenting his findings during an "Ask The Expert" teleconference. The teleconference will be held Wednesday, May 25 from 1 to 2 PM EST and is free and open to all.

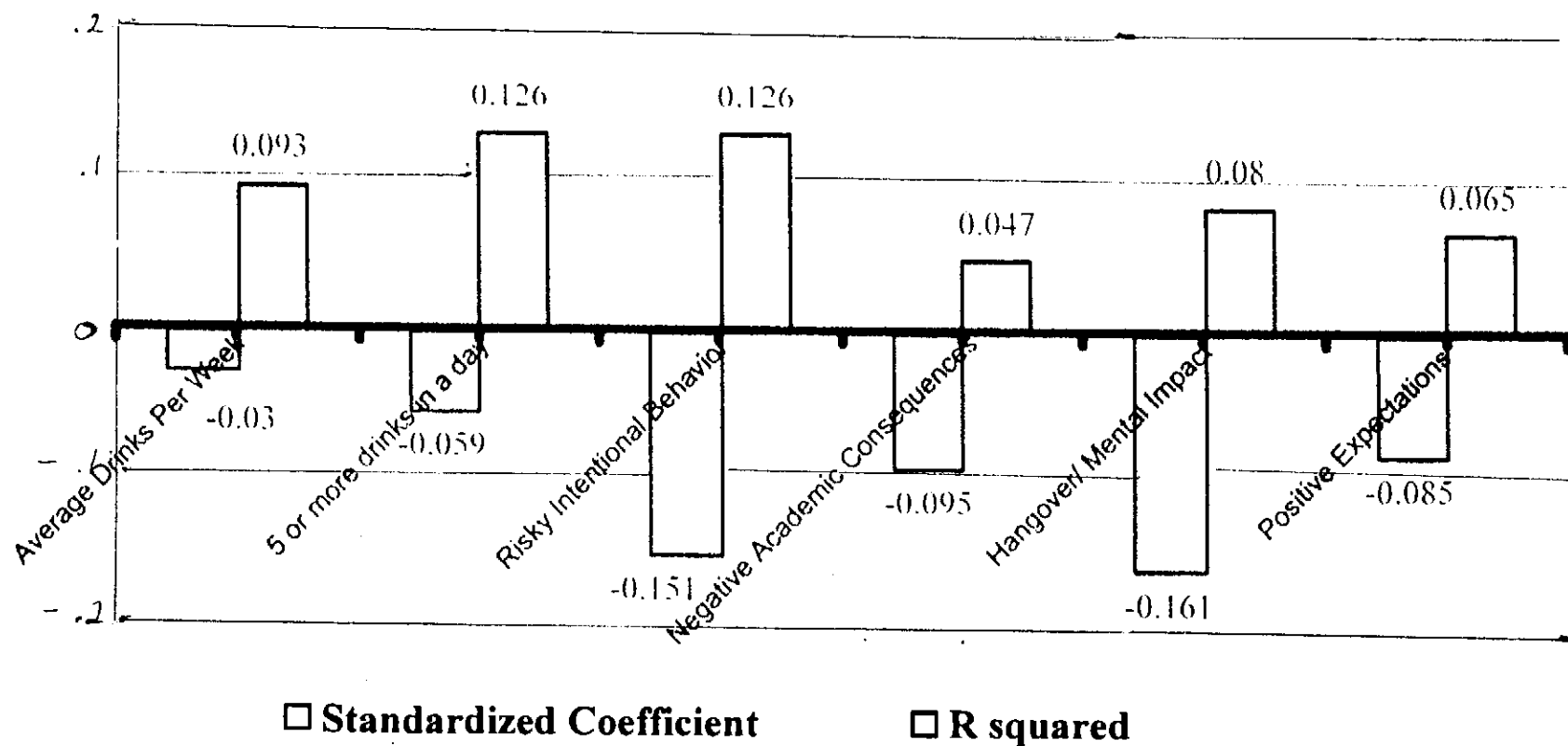
To register, please click on the link below and fill out the brief form:
http://www.outsidetheclassroom.com/ask_expert.asp

Sincerely,



Brandon Busteed
Founder and CEO
Outside The Classroom

For Overall Study Population, Intervention Versus Comparison Group Variable Regression Finding for Selected Study Dependent Variables



FOR IMMEDIATE RELEASE

CONTACT: Erika Tower
Outside The Classroom, Inc.
877.338.5001 x237

Academic Study Finds Online Alcohol Prevention Reduces Negative Consequences of College Drinking

**University of Illinois researcher concludes students who completed AlcoholEdu®
reported 50% fewer health, social, and academic consequences**

BOSTON, MA – May 24, 2005 – Students at American colleges who completed an online alcohol prevention program in 2003-2004 reported 50 percent fewer negative health, social, and academic consequences related to drinking than students who had not yet been exposed to the program, according to a new research study by Andrew F. Wall, Ph.D., of the University of Illinois at Urbana-Champaign. The study of 23,127 students is the first rigorous evaluation demonstrating the effectiveness of prevention in reducing the harm caused by college drinking.

"Many education-based solutions to the college drinking problem have been tried, but there has been little rigorous, multi-institutional research on their effectiveness. Our study set out to determine whether an online prevention program would change behavior and consequences," Dr. Wall said. "The results provide evidence for the first time that an interactive educational experience can substantially reduce the negative consequences of high-risk drinking."

The study, which compared students who had completed AlcoholEdu to students who had not yet done so at four-week intervals during the academic year, is the largest-ever evaluation of a college alcohol prevention program. Having used stringent tests of statistical significance, the study produced highly reliable results.

Dr. Wall's finding of 50% fewer negative consequences represented an averaged reduction of several kinds of negative consequences, including things such as:

- missing class
- attending class hungover
- blacking out
- having unprotected sex
- vomiting in public
- injuring yourself
- performing poorly in athletics.

According to Dr. Wall, AlcoholEdu's beneficial effect on negative consequences was documented throughout the academic year, regardless of when students completed the course.

AlcoholEdu, which is in use at over 450 colleges and universities nationwide, is a highly customized and personalized two and one-half hour online course from Outside The

Classroom, Inc. It integrates a number of alcohol prevention strategies designed to help students make good decisions about alcohol.

There have been evaluation studies of other strategies to reduce high-risk college drinking, including environmental management programs and policy- or enforcement-based initiatives attempting to reduce the availability of alcohol or increase the penalties imposed on underage students caught drinking. But Dr. Wall said his study was intended to be the first comprehensive assessment of the effectiveness of a broad-based preventive education strategy.

"Our findings indicate that interactive education has persuasive evidence as a prevention strategy," Dr. Wall said. "And by linking specific outcomes to the educational techniques in AlcoholEdu, we can understand how education actually changes the behavior of the students who engage with it."

According to Dr. Richard P. Keeling, Vice President of Prevention Programs for Outside The Classroom, "We designed this program to function as a primary prevention effort for an entire population – something we call Population-Level Prevention®. The program works because it is for everyone – not just high-risk drinkers, but abstainers and moderate drinkers alike. High-risk college drinking is a major public health issue and needs to be treated with population-level responses."

Prior to the completion of Dr. Wall's independent study, Outside The Classroom and the colleges and universities using the program had already produced a mounting body of evidence that AlcoholEdu was delivering measurable and positive results. "AlcoholEdu's consistent effectiveness has gotten the attention of major universities that have made it the cornerstone of their comprehensive prevention strategies," said Brandon Busteed, Founder and CEO of Outside The Classroom. "The program is the result of years of research, stringent evaluation, and feedback from hundreds of thousands of students. We are pleased, but not surprised, by Dr. Wall's results. He confirms what many colleges have learned: that prevention with AlcoholEdu works."

About Outside The Classroom

Outside The Classroom (www.outsidetheclassroom.com) is the leading provider of online alcohol prevention programs and offers course for college- and high-school-aged students. The AlcoholEdu development team is led by Richard P. Keeling, MD, Vice President for Prevention Programs, and includes prevention professionals, assessment and evaluation experts, and leading scientists, including distinguished neuropsychologists and brain researchers Scott Swartzwelder, Ph.D., and Aaron White, Ph.D., of Duke University Medical Center. Outside The Classroom collaborates with many prominent organizations, including the National Association of Student Personnel Administrators (NASPA) and Mothers Against Drunk Driving (MADD).

###

2006-2007 YEAR END REPORT COUNSELING & HEALTH SERVICES – COUNSELING CENTER

Summary of Highlights:

- **Clinical Services** – Continued using the “**Suicide Tracking**” program implemented during 2005-06 and monitored **163** students who posed a risk of self-harm; provided mandatory two-session assessments for **15** students referred by the Critical Incident Response Team (CIRT). Overall, the numbers for 2006-07 for both suicide tracking and CIRT referrals were reduced by **80%** and **500%** respectively from 2005-06 which raises the question of the impact of tracking clients’ suicidal behavior and the mandatory assessment. Given that these programs are only in their second year of implementation, it is too early to fully assess the true impact of these programs on students’ behavior.
- **Clinical Services** – Responded to **203** crisis/emergency consultations with students, faculty/staff, and/or parents; conducted an additional **122** crisis/emergency intakes with students; provided **1014** regular intakes and generated over **6247** individual client hours representing an increase of **11%** over last year; provided **752** psychiatric consultations which represents an increase of **42%** from 2005-06.
- **Client Satisfaction with counseling and outcome of service** – Similar to last year, we achieved a client satisfaction rating of **94%** for individual counseling; about **30%** of students receiving counseling in the Center were at risk of leaving/withdrawing from school if they were not provided with treatment; greater than **90%** of these students indicated that counseling helped them stay in school; measures of positive counseling effectiveness for students as measured by the Outcome Measure – 45 (**OM-45**) proved significant for symptom reduction and total scale score from session one to termination, **p < .000**.
- **Outreach and Consultation** – Provided **964** outreach programs during 2006-07 with a **92.6%** good/excellent rating, an increase of **46** programs (**5%**) for 2005-06; at the request of faculty, many outreach programs are provided during class time as a supplement to academic content.
- **Outreach and Consultation** – Provided **42,496** participant contacts for all outreach programs during 2006-07, an increase of **18%** over 2005-06; continued to offer awareness week activities for **Sexual Assault Prevention Awareness** and **Eating Disorders Awareness**; implemented new programming for **Suicide Awareness**.
- **Technology** – with University Computing Service, initiated improvements to the client intake system by developing online registration and appointment scheduling, expected completion by Fall Semester, 2007.
- **Testing Programs** – Provided a total of **4,932** test administrations that included Computer Based, Internet Based, National Saturday, and Counseling Center testing programs, a **10.5%** increase from 2005-06; increased participant testing capacity with the addition of Pearson VUE lab.
- **Training** – Continued to provide immersive learning/training experiences for three pre-doctoral interns, 10 Master’s interns, and 7 doctoral practicum students; generated direct service hours by category are – pre-doctoral interns, **1599** hours; Master’s interns, **2284** hours; and doctoral practicum students, **835** hours (based on five clinical hours/week).

Assessment Form for 2006-2007
Ball State University
Division of Student Affairs

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: CLINICAL SERVICES

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Individual Counseling	Total accounting of the hours spent in providing individual counseling	'06-'07 = 3877	'05-'06 = 3002 '04-'05 = 4199 '03-'04 = 3669 '02-'03 = 3330 '01-'02 = 3438	Program evaluation; establishing data on the ongoing and/or changing needs in service requirements; understanding of the growth of clinical programs; understanding of the use of Counseling Center resources
Psychiatric Consultation	Total accounting of the hours of psychiatric services provided to students	'06-'07 = 752	'05-'06 = 437* '04-'05 = 404 '03-'04 = 296 '02-'03 = 298 '01-'02 = 246 *Incomplete total – Data collected through 3/31/06 only.	“
Psychiatric Consultation hours provided by Health Center staff	Total accounting of referrals to the Health Center	'06-'07 = 87	'05-'06 = 132 '04-'05 = 156 '03-'04 = 239 '02-'03 = 151 '01-'02 = 281	“
Group Screening/Intakes	Total accounting of hours spent in clearing clients for participation in group therapy	'06-'07 = 23	'05-'06 = 33* '04-'05 = 103 '03-'04 = 62 '02-'03 = 26 '01-'02 = 31 *Incomplete total – Data collected through 3/31/06 only.	“

Group Counseling Hours	Total accounting of individual contacts for students seen in group treatment	'06-'07 data <ul style="list-style-type: none"> ▪ Spring = 431 ▪ Fall = 277 ▪ TOTAL = 708 	'05-'06 = 414* '04-'05 = 691 '03-'04 = 437 '02-'03 = 233 '01-'02 = 506 *Incomplete total – Data collected through 3/31/06 only.	“
Suicide Tracking Cases	Accounting of the numbers of students seen and identified as having suicide potential	'06-'07 = 163	'05-'06 = 326* *Incomplete total – Data collected through 3/31/06 only.	Monitor the appropriateness of treatment provided for seriously at-risk students; provide appropriate level of expertise for treatment
Critical Incident Response Team (CIRT) mandated two session assessments	Total accounting of the number of CIRT students seen in the Counseling Center	'06-'07 = 15	'05-'06 = 73* *Incomplete total – Data collected through 3/31/06 only.	Monitor the appropriateness of treatment provided for seriously at-risk students; provide appropriate level of expertise for treatment; provide appropriate feedback for parents and administrators as required by law
Crisis/Emergency Consultations	Total of all crisis/emergency contacts including after hours calls	'06-'07 = 203	'05-'06 = 212* '04-'05 = 244 '03-'04 = 207 '02-'03 = 178 '01-'02 = 159 *Incomplete total – Data collected through 3/31/06 only.	Assessment of need for crisis and emergency services for students; assessment of the need for hospitalization, etc.
Crisis/Emergency Intakes	Total number of students seen on crisis/emergency intake (immediate intake due to seriousness)	'06-'07 = 122	'05-'06 = 225* '04-'05 = 163 '03-'04 = 164 '02-'03 = 131 '01-'02 = 139 *Incomplete total – Data collected through 3/31/06 only.	Assessment of need for crisis and emergency services for students; assessment of the need for hospitalization; provide appropriate level of skill and training to meet the needs of students

Regular Intakes	Total number of students seen for regular intake	'06-'07 = 879	'05-'06 = 745* '04-'05 = 915 '03-'04 = 861 '02-'03 = 830 '01-'02 = 855 *Incomplete total – Data collected through 3/31/06 only.	
Faculty/Staff Intakes and/or Consultations	Total number of faculty/staff requesting either intake or consultation	'06-'07 = 13	'05-'06 = 9* *Incomplete total – Data collected through 3/31/06 only.	Assessment of the need/use of this service to faculty/staff members
		Total Intakes = 1014 Total Clinical Services hours generated = 6247		

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: CLINICAL SERVICES – CLIENT SATISFACTION

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Client Satisfaction with Individual Therapy	<p>Client Satisfaction Questionnaire</p> <p>During Spring Semester 2006 this questionnaire was administered online for the first time. It was expected that the online version would provide a higher response rate. Also, as a result of previous client satisfaction data, several new items were included. The results of several critical items are provided here.</p>	<p>Question: "In general, how satisfied are you with your counseling experience?"</p> <p>'06-'07 data*</p> <p>Fall Semester:</p> <ul style="list-style-type: none"> M/CS = 94% MD = 2% <p>Spring Semester:</p> <ul style="list-style-type: none"> M/CS = 94% MD = 3% <p>*M/CS = Moderately to completely satisfied *MD = Moderately dissatisfied</p>	<p>'05-'06 data</p> <p>Fall Semester:</p> <ul style="list-style-type: none"> M/CS = 95% MD = 5% <p>Spring Semester:</p> <ul style="list-style-type: none"> M/CS = 95.4% MD = 4.6% <p>'04-'05 data</p> <p>Fall Semester:</p> <ul style="list-style-type: none"> M/CS = 95.6% MD = 4.4% <p>Spring Semester:</p> <ul style="list-style-type: none"> M/CS = 98% MD = 2% <p>'03-'04 data</p> <p>Fall Semester –not available</p> <p>Spring Semester:</p> <ul style="list-style-type: none"> M/CS = 96.8% MD = 3.4% 	Assessment of the impact of counseling for students; program improvement

		<p>Question: “Has your counseling experience helped you to stay in school?”</p> <p>‘06-‘07 data Fall Semester: ▪ Yes = 31% ▪ Not a concern = 66% Spring Semester: ▪ Yes = 27% ▪ Not a concern = 68%</p> <p>Approximately 37% of students indicated that counseling improved their feelings of being more comfortable in the university environment.</p>	<p>‘05-‘06 data Fall Semester: ▪ Yes = 33% ▪ Not a concern =65% Spring Semester: ▪ Yes = 34% ▪ Not a concern = 61%</p> <p>‘04-‘05 data Fall Semester: ▪ Yes = 31% ▪ Not a concern =65% Spring Semester: ▪ Yes = 35% ▪ Not a concern = 64%</p> <p>‘03-‘04 data Fall Semester –not available Spring Semester: ▪ Yes = 35% ▪ Not a concern = 62%</p>	
		<p>Question: “I feel better about myself.”</p> <p>‘06-‘07 data Fall Semester: ▪ Yes = 95% Spring Semester: ▪ Yes = 92%</p>	<p>‘05-‘06 data Fall Semester: ▪ Yes = 93% Spring Semester: ▪ Yes = 88%</p> <p>‘04-‘05 data Fall Semester: ▪ Yes = 96% Spring Semester: ▪ Yes = 97%</p> <p>‘03-‘04 data Fall Semester –not available Spring Semester: ▪ Yes = 95%</p>	
		<p>Question: “I have become more successful in meeting my academic goals.”</p> <p>‘06-‘07 data Fall Semester: ▪ Yes = 35% Spring Semester: ▪ Yes = 42%</p>	<p>‘05-‘06 data –new item ▪ Yes = 45%</p> <p>‘04-‘05 data –not available</p> <p>‘03-‘04 data –not available</p>	

		Question: "I have become more successful in meeting my personal goals." '06-'07 data Fall Semester: ▪ Yes = 82% Spring Semester: ▪ Yes = 80%	'05-'06 data –new item ▪ Yes = 83% '04-'05 data –not available '03-'04 data –not available	
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Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: CLINICAL SERVICES –OUTCOME DATA

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results																
Overall Effectiveness of Individual Counseling	Outcome Questionnaire 45 (OQ 45)	'06-'07 Mean Scores OQ-45 <table><tr><td></td><td>Pre</td><td>Post</td><td></td></tr><tr><td>Sum 06</td><td>73</td><td>49</td><td>P<.001</td></tr><tr><td>Fall 06</td><td>63</td><td>39</td><td>P<.001</td></tr><tr><td>Spr 07</td><td>60</td><td>41</td><td>P<.001</td></tr></table>		Pre	Post		Sum 06	73	49	P<.001	Fall 06	63	39	P<.001	Spr 07	60	41	P<.001	'05-'06 data –not available '04-'05 data –not available '03-'04 data –not available	Understanding the effectiveness of treatment
	Pre	Post																		
Sum 06	73	49	P<.001																	
Fall 06	63	39	P<.001																	
Spr 07	60	41	P<.001																	

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: OUTREACH AND CONSULTATION

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Mental Health Outreach Programs Presented	Total Program Count	'06-'07 = 964	'05-'06 = 918 '04-'05 = 906 '03-'04 = 806 '02-'03 = 803 '01-'02 = 722	Comparative growth of the program; percentage increase/decrease in use; trends in program requests; relative demand for outreach requests
Outreach hours generated	Total accounting of staffing hours	'06-'07 = 1,283	'05-'06 = 1287 '04-'05 = 1420 '03-'04 = 992 '02-'03 = 918 '01-'02 = 1765	Use of staffing resource – time/hours generated – in preparation and planning for outreach programs
Outreach Program Participants	Total number of participants served	'06-'07 = 42,496	'05-'06 = 34,303 '04-'05 = 32,255 '03-'04 = 22,465 '02-'03 = 28,835 '01-'02 = 28,803	Relative student use of outreach programs; comparative increase/decrease in student use; trends in program use

Number of Program Evaluations	Total number of completed Outreach Evaluation Questionnaires received	Total = 2,504	'05-'06 = 3191 '04-'05 = 3115 '03-'04 = NA '02-'03 = 3421 '01-'02 = NA	Program assessment; recommendations for improvement
Overall Rating of Outreach Programs	Percentage ratings on Outreach Evaluation Questionnaire	'06-'07 data 93% = Excellent/good 6% = Satisfactory 1% = Fair .1% = Poor	'05-'06 = 92.6%, ex/good '04-'05 = 92%, ex/good '03-'04 = 95%, ex/good '02-'03 = 96%, ex/good '01-'02 = NA	Measure of program relevance and quality; continuity of quality
Program Utility for Participants	Outreach Evaluation Question – “The content of this program was relevant to me.”	'06-'07 data 67% = Yes 26% = Partially 7% = No	Y P N* '05-'06 = 74%, 23%, 2% '04-'05 = 65%, 33%, 3% '03-'04 = NA '02-'03 = 65%, 30%, 5% '01-'02 = NA	Evaluation of program content; program improvement
Staff Generated Consultations	Total number of consultations provided in various formats	'06-'07 data <ul style="list-style-type: none"> 23 faculty/staff consultations 13 faculty/staff training seminars 14 media interviews 11 panel discussions 30 resource fairs, tours 50 trauma response activities 99 screenings (alcohol, eating disorders, etc.) 19 university-wide programming activities 86 Concerned Charlie 17 printed materials 532 presentations 70 surveys Total = 964	'05-'06 = 274 Previous data not available in this format	Measurement of time needed and the level of services requested in providing ample coverage for faculty/staff concerns in reference to students; provision of accurate information for students on campus; measurement of resources needed in responding to the media, etc.
Concerned Charlie	Total number of questions answered on website and “hits” from viewers	'06-'07 data <ul style="list-style-type: none"> Questions = 86 “Hits” = 7,767 	Previous data not available in this format	
Outreach Programs – Student Retention Data	Direct participant responses to questions	Outreach Evaluation total N = 2,504	'05-'06 = 3191 Previous comparative data not available in this format	Helps in compiling data about student retention and engagement in the BSU experience

New Questions added to Outreach Evaluation Questionnaire for '05-'06	I left the program: <ul style="list-style-type: none"> Knowing more about topic Feeling more prepared to manage issues 	Y P N* '06-'07 = 70%, 21%, 9% '06-'07 = 63%, 27%, 10% *Y=Yes, P=Partially, N=No	Y P N* '05-'06 = 70%, 26%, 4% '05-'06 = 64%, 30%, 6% *Y=Yes, P=Partially, N=No	
	This program helped me: <ul style="list-style-type: none"> Reach my academic goals Enhance my BSU experience 	'06-'07 = 32%, 39%, 29% '06-'07 = 43%, 37%, 20__% *Y=Yes, P=Partially, N=No	'05-'06 = 36%, 41%, 23% '05-'06 = 46%, 37%, 17% *Y=Yes, P=Partially, N=No	

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: TESTING PROGRAMS

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Participants: Educational Testing Service – Computer Based Testing	Total participant count	'06-'07 = 2196	'05-'06 = 2014 '04-'05 = 2313	Measurement of program use and growth; estimate of service demand
Participants: CBT (Pearson VUE)	Total participant count	'06-'07 = 122	New program	Measurement of program use and growth; estimate of service demand
Participants: Counseling Center Clients	Total participant count	'06-'07 = 208	'05-'06 = 240	Estimate of Counseling Center use and demand; determine counseling trends in testing
Participants: Miscellaneous Examinations	Total participant count	'06-'07 = 257	'05-'06 = 183 '04-'05 = 210	Measurement of program use and growth; estimate of service demand
Participants: National Saturday Testing	Total participant count	'06-'07 = 1877	'05-'06 = 1371 '04-'05 = 1009	Estimate of regional and state use and demand
TOTAL		'06-'07 = 4932	'05-'06 = 4415 '04-'05 = 3532	

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: TRAINING PROGRAM – DOCTORAL PRACTICUM

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of Services from Doctoral Practicum Students	<p>Total accounting of services provided by doctoral practicum students.</p> <p>Students from the doctoral program in the Department of Counseling Psychology receive intensive practicum experience through the Counseling Center. These students are supervised by professional staff but also provide valuable clinical and outreach services through the Center.</p>	<p>'06-'07 hours per category:</p> <ul style="list-style-type: none"> 157 = All Intakes 572 = Individual Cnslg 106 = Outreach 1 hr/wk – Individual Supv 1 hr/wk – Group Supv 835 = Total Direct Svc 	<p>Reportable data for comparable hours varies according to the number of practicum students who work in the Center each semester.</p> <p>2005-06 hours per category:</p> <ul style="list-style-type: none"> 141 = All Intakes 519 = Individual Cnslg 300 = Outreach 1 hr/wk – Individual Supv 1 hr/wk – Group Supv 960 = Total Direct Svc 	<p>Monitor the Counseling Center requirements for doctoral practicum students who participate in the practicum; feedback and evaluation of students; accounting for clinical hours generated in preparation for internship; measure growth of the total practicum experience</p>

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: TRAINING PROGRAM – MA INTERNS

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of Services from Masters Interns	<p>Total accounting of services provided by Masters level interns.</p> <p>MA interns are BSU students who are required to do an intensive nine month long internship experience. Students who intern in the Counseling Center are enrolled in one of two programs – Masters in Counseling (Department of Counseling Psychology and Guidance Services) or Masters in Clinical Psychology (Department of Psychological Sciences)</p>	<p>'06-'07 hours per category:</p> <ul style="list-style-type: none"> 368 = All Intakes 1236 = Individual Cnslg 186 = Group Counseling 506 = Outreach 472 = Individual Supv 2284 = Total Direct Svc 	<p>'05-'06 hours per category:</p> <ul style="list-style-type: none"> 357 = All Intakes 1059 = Individual Cnslg 116 = Group Counseling 508 = Outreach 456 = Individual Supv 2070 = Total Direct Svc <p>'04-'05 hours per category:</p> <ul style="list-style-type: none"> 332 = All Intakes 1125 = Individual Cnslg 166 = Group Counseling 729 = Outreach 443 = Individual Supv 2291 = Total Direct Svc 	<p>Monitor the requirements of the 900 hour CPSY experience in accordance with counselor certification; monitor each intern's contribution to the various programs (clinical and outreach) of the Counseling Center; measure growth of the total internship program; etc.</p>

Department: COUNSELING & HEALTH SERVICES -- COUNSELING CENTER

Program: TRAINING PROGRAM – PRE-DOCTORAL INTERNS

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Summary of Services from Pre-doctoral Interns	<p>Total accounting of services provided. The current intern class ('06-'07) is in the middle of the internship year. The three interns were selected from 65 applicants. A summary of their data will be available for the '07-'08 annual report.</p> <p>In order to provide a consistent accounting of the productivity of pre-doctoral interns, the total accounting of hours is based on the previous year's class.</p>	<p>Total Hours by Category:</p> <p>'05-'06</p> <ul style="list-style-type: none"> ▪ 979.5 = Counseling ▪ 369 = Supv of MA's ▪ 250.5 = Outreach (hours) ▪ 172 = Outreach programs ▪ 1599 = TOTAL DIRECT SVC 	<p>Total Hours by Category:</p> <p>'04-'05</p> <ul style="list-style-type: none"> ▪ 1642 = Direct Service ▪ 1134 = Clinical Contact ▪ 366 = Supv of MA's ▪ 152 = Outreach (hours) ▪ 140 = Outreach programs <p>'03-'04</p> <ul style="list-style-type: none"> ▪ 1663 = Direct Service ▪ 1149 = Clinical Contact ▪ 369 = Supv of MA's ▪ 146 = Outreach (hours) ▪ 116 = Outreach programs <p>'02-'03</p> <ul style="list-style-type: none"> ▪ 1564 = Direct Service 995 = Clinical Contact 359 = Supervision of MA's 210 = Outreach (hours) 166 = Outreach programs <p>'01-'02</p> <ul style="list-style-type: none"> 1576 = Direct Service 916 = Clinical Contact 475 = Supervision of MA's 186 = Outreach (hours) 89 = Outreach programs 	<p>Monitor the requirements of the full-time experience in accordance with national expectations; monitor requirements of the American Psychological Association; monitor each intern's contribution to the various programs (clinical and outreach) of the Counseling Center; measure growth of the total internship program; etc.</p>

This completed form must be submitted to your area head and to the VP of the Division. To be included in the 2006-2007 divisional report, this form must be submitted by May 1, 2007.

Submitted by: _____

Date: _____

Date received in Dean's Office

2006-2007 YEAR END REPORT COUNSELING & HEALTH SERVICES -- HEALTH CENTER

Summary of Highlights:

- **Clinical Services** – Responded to over 15,000 students since July 1, 2006. This is 9 months of service and will be adjusted upward at the end of the fiscal year
- **Prescriptions filled**—Over 17,000 prescriptions filled in 9 months since July 1, 2006
- **Patient Satisfaction**—We are currently implementing a new collaborative project with the American College Health Association to measure and share indices of patient satisfaction. Data using our old method of collection is available for Fall Semester 2006 and helped identify a provider who is no longer employed in the health. It has also identified areas for education and remediation among the staff.
- **Class Survey**—Candidates are currently being interviewed to fill a position to implement the measures suggested by this report first available in last year's year end report

**Assessment Form for 2006-2007
Ball State University
Division of Student Affairs**

Department: COUNSELING & HEALTH SERVICES – HEALTH CENTER

Program: _____

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Total number of patients served in the Health Center	Accounting of Health Center statistical data	Data accumulated during fiscal year-attached	Total patients seen: 2006-07 = 15471* 2005-06 = 19576 2004-05 = 21,385 2003-04 = 26,822 2002-03 = 27,590	Program assessment; Total program impact Program planning and resource utilization
Number of prescriptions filled by pharmacy	Accounting of pharmacy statistical data	See attached summary	2006-07 = 17504* 2005-06 = 18697 2004-05 = 15456 2003-04 = 3358	
PR Class Survey	Random survey	See attached summary	*incomplete year	Interviewing candidates for position to implement as of 4/12/07
Patient Satisfaction	Survey of health center users	See attached summary		Staff changes Staff education

This completed form must be submitted to your area head and to the VP of the Division. To be included in the 2006-2007 divisional report, this form must be submitted by May 1, 2007.

Submitted by: _____

Date: _____

Date received in Dean's Office

2006-2007 YEAR END REPORT

COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION

Summary of highlights:

- Conducted over 300 outreach programs reaching more than 9,000 students.
- Provided universal precautions trainings to over 1,000 students to equip them for immersive field experiences.
- Provided nationally recognized substance use diversion programming to 54 students.
- In collaboration with multiple academic departments and community organizations, sponsored observances of National Collegiate Alcohol Awareness Week, Breast Cancer Awareness Month, Great American Smokeout, World AIDS Day, National Black HIV/AIDS Awareness Day, Sexual Responsibility Week, Sexual Assault Awareness Week, Eating Disorders Awareness Week, Spring Break Safety Awareness Week, and National Alcohol Screening Day to enhance student development.
- On average, 89.7% of participants reported knowing more about a topic at the conclusion of a Health Education program.
- On average, 79.1% of participants reported feeling more able to manage related issues after attending a Health Education program.
- On average, 91.2% of participants reported their overall evaluation of a Health Education program as “Good” or “Excellent.”

**Assessment Form for 2006-2007
Ball State University
Division of Student Affairs**

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION

Program: UNIVERSAL PRECAUTIONS TRAININGS

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2002-2003)	Use of Results
Total individuals trained	Participant count	1056	Data not available	Demonstrate university utilization of training
Departments utilizing training	Department count	5	Data not available	Demonstrate university utilization of training
Clarity of training content	Counseling & Health Services Outreach Program Evaluation	Clear: 99.4% Partially Clear: 0.6% Not Clear: 0%	Clear: 100% Partially Clear: 0% Not Clear: 0%	Improve presentation of material
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 97.5% Partially Relevant: 1.9% Not Relevant: 0.6%	Relevant: 90.5% Partially Relevant: 9.5% Not Relevant: 0%	Determine adequacy of curriculum
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 98.7% Partially Prepared: 1.3% Not Prepared: 0%	Prepared: 85.7% Partially Prepared: 14.3% Not Prepared: 0%	Determine efficacy of facilitator training
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 87.4% Partially Know More: 10.1% Do Not Know More: 2.5%	Data not available	Determine adequacy of curriculum
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 91.2% Partially Able to Manage Issues: 7.5% Not Able to Manage Issues: 1.3%	Data not available	Determine adequacy of curriculum.
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 70.4% Partially Helps Reach Goals: 22.0% Does Not Help Reach Goals: 7.5%	Data not available	Determine potential impact of program on student retention.
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 64.8% Partially Enhanced: 29.6% Did Not Enhance: 5.7%	Data not available	Determine potential impact of program on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 63.0% Partially Will Change: 23.4% Will Not Change: 13.6%	Data not available	Determine adequacy of curriculum and motivational skill of facilitators
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 76.0% Good: 21.4% Satisfactory: 2.6% Fair: 0% Poor: 0%	Excellent: 34.1% Good: 56.8% Satisfactory: 9.1% Fair: 0% Poor: 0%	Determine appropriateness of program

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: SMOKING CESSATION CLASSES**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2002-2003)	Use of Results
Total number of participants	Participant count	23	36	Determine need for program
Clarity of class content	Counseling & Health Services Outreach Program Evaluation	Clear: 100% Partially Clear: 0% Not Clear: 0%	Clear: 100% Partially Clear: 0% Not Clear: 0%	Improve presentation of material
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 100% Partially Relevant: 0% Not Relevant: 0%	Relevant: 86.4% Partially Relevant: 13.6% Not Relevant:	Determine adequacy of curriculum
Preparation of facilitator	Counseling & Health Services Outreach Program Evaluation	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Prepared: 96% Partially Prepared: 4% Not Prepared: 0%	Determine efficacy of training
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 100% Partially Know More: 0% Do Not Know More: 0%	Data not available	Determine adequacy of curriculum
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 75% Partially Able to Manage Issues: 25% Not Able to Manage Issues: 0%	Data not available	Determine adequacy of curriculum
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 25% Partially Helps Reach Goals: 50% Doesn't Help Reach Goals: 25%	Data not available	Determine potential impact of program on student retention
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 33.3% Partially Enhanced: 33.3% Did Not Enhance: 33.3%	Data not available	Determine potential impact of program on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 50% Partially Will Change: 50% Will Not Change: 0%	Data not available	Determine adequacy of curriculum and motivational skill of facilitators
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 75% Good: 0% Satisfactory: 25% Fair: 0% Poor: 0%	Excellent: 74.2% Good: 22.5% Satisfactory: 3.3% Fair: 0% Poor: 0%	Determine appropriateness of program

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: WEIGHT LOSS CLASSES**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2004-2005)	Use of Results
Total number of participants	Participant count	54	96	Determine growth of program
Clarity of class content	Counseling & Health Services Outreach Program Evaluation	Clear: 90.6% Partially Clear: 9.4% Not Clear: 0%	Clear: 96.9% Partially Clear: 3.1% Not Clear: 0%	Improve presentation of material
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 96.9% Partially Relevant: 3.1% Not Relevant: 0%	Relevant: 93.9% Partially Relevant: 6.1% Not Relevant: 0%	Determine adequacy of curriculum
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Prepared: 100% Partially Prepared: 0% Not Prepared: 0%	Determine which presenters to invite to lead sessions
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 100% Partially Know More: 0% Do Not Know More: 0%	Data not available	Determine adequacy of curriculum
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 78.1% Partially Able to Manage Issues: 21.9% Not Able to Manage Issues: 0%	Data not available	Determine adequacy of curriculum
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 50% Partially Helps Reach Goals: 30% Does Not Help Reach Goals: 20%	Data not available	Determine potential impact of program on student retention
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 61.3% Partially Enhanced: 35.5% Did Not Enhance: 3.2%	Data not available	Determine potential impact of program on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 68.8% Partially Will Change: 31.3% Will Not Change: 0%	Data not available	Determine adequacy of curriculum and motivational skill of presenter
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 75.0% Good: 21.9% Satisfactory: 3.1% Fair: 0% Poor: 0%	Excellent: 69.4% Good: 30.6% Satisfactory: 0% Fair: 0% Poor: 0%	Determine appropriateness of program

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: EDUCATIONAL PRESENTATIONS**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2001-2002)	Use of Results
Total number of participants	Participant count	3298	Data not available	Determine usage of outreach Services; need for marketing
Clarity of presentation content	Counseling & Health Services Outreach Program Evaluation	Clear: 96.2% Partially Clear: 3.8% Not Clear: 0%	Clear: 91.7% Partially Clear: 8.3% Not Clear: 0%	Improve presentation material as needed
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 83.7% Partially Relevant: 13.0% Not Relevant: 3.3%	Relevant: 70.3% Partially Relevant: 25.3% Not Relevant: 4.4%	Determine adequacy of presentation material
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 96.8% Partially Prepared: 3.2% Not Prepared: 0%	Prepared: 87.6% Partially Prepared: 11.2% Not Prepared: 1.2%	Determine efficacy of presenter training
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 85.4% Partially Know More: 12.7% Do Not Know More: 1.9%	Data not available	Determine adequacy of presentation material
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 83.0% Partially Able to Manage Issues: 14.1% Not Able to Manage Issues: 3.0%	Data not available	Determine adequacy of presentation material
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 47.6% Partially Helps Reach Goals: 31.0% Does Not Help Reach Goals: 21.2%	Data not available	Determine potential impact of programming on student retention
Enhancement of BSU experience	Counseling & Health Services Outreach Program Evaluation	Enhanced: 56.3% Partially Enhanced: 31.3% Did Not Enhance: 12.2%	Data not available	Determine potential impact of programming on student engagement
Attitude/Behavior change	Counseling & Health Services Outreach Program Evaluation	Will Change: 54.0% Partially Will Change: 31.8% Will Not Change: 14.2%	Data not available	Determine adequacy of presentation material/ motivational skill of presenter
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 68.6% Good: 28.1% Satisfactory: 3.0% Fair: 0.3% Poor: 0%	Excellent: 42% Good: 44.6% Satisfactory: 8.0% Fair: 3.4% Poor: 1%	Determine appropriateness of program

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: CONDOM SHOPPE**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2004-2005)	Use of Results
Total number of clients	Client count	1476	1748	Determine number to purchase
Frequency of condom use	Condom Shoppe Survey	Always: 53.6% Mostly: 31.1% Sometimes: 9.3% Rarely: 4.6% Never: 1.3%	Always: 56.9% Mostly: 27.7% Sometimes: 7.7% Rarely: 6.2% Never: 1.5%	Assess health risk behaviors of students
Frequency of visits	Condom Shoppe Survey	1 Visit: 26.5% 2 Visits: 15.0% 3 Visits: 10.2% 4 Visits: 4.1% 5 Visits: 3.4% 6 or More Visits: 40.8%	1 Visit: 15.6% 2 Visits: 12.5% 3 Visits: 9.4% 4 Visits: 7.0% 5 Visits: 3.1% 6 or More Visits: 52.3%	Determine how often students utilize free condoms rather than purchasing them from local merchants
Satisfaction with selection	Condom Shoppe Survey	Always: 36.2% Mostly: 47.7% Sometimes: 10.1% Rarely: 4.0% Never: 2.0%	Always: 34.4% Mostly: 46.1% Sometimes: 15.6% Rarely: 2.3% Never: 1.6%	Determine brands and styles to keep in stock
Referrals to peers	Condom Shoppe Survey	Always: 50.3% Mostly: 20.4% Sometimes: 21.1% Rarely: 6.1% Never: 2.0%	Always: 55.5% Mostly: 24.2% Sometimes: 12.5% Rarely: 3.9% Never: 3.9%	Determine need for direct advertising versus word-of-mouth
Pregnancy impact on academic performance	NCHA Survey	Not applicable: 95.4% Did not affect academics: 3.8% Received a lower grade on exam: 0.6% Received lower grade in course: 0.1% Received incomplete or dropped course: 0.1%	Not applicable: 98.2% (2003) Did not affect academics: 0.8% (2003) Received lower grade on exam: 0.8% (2003) Received lower grade in course: 0.3% (2003) Received incomplete or dropped course: 0% (2003)	Determine potential impact of service on student retention
STD impact on academic performance	NCHA Survey	Not applicable: 95.3% Did not affect academics: 4.4% Received lower grade on exam: 0.2% Received lower grade in course: 0.1% Received incomplete or dropped course: 0%	Not applicable: 96.3% (2003) Did not affect academics: 3.2% (2003) Received lower grade on exam: 0.5% (2003) Received lower grade in course: 0% (2003) Received incomplete or dropped course: 0% (2003)	Determine potential impact of service on student retention

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: PEER HEALTH EDUCATION**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2004-2005)	Use of Results
Total number of volunteers	Participant count	34	30	Maintain adequate volunteer force
Retention of volunteers	Participant count	48.4%	Not available	Maintain adequate volunteer force while minimizing need for trainings
Believability of volunteers	NCHA Survey	2006: Believable: 39.4% Neither Believable nor Unbelievable: 55.4% Unbelievable: 5.2%	2003: Believable: 47.2% Neither Believable nor Unbelievable: 50.9% Unbelievable: 1.8%	Determine student perceptions of PHE credibility
Demand for PHE programming	Program request count	61	70	Determine need for marketing and for volunteer needs

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: HIV/SYPHILIS TESTING**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2002-2003)	Use of Results
Total number of tests by appointment	Client count	138	132	To determine staffing and supply needs
Total number of tests at outreach events	Client count	148	Data not available	To determine staffing and supply needs
HIV infection impact on academics	NCHA Survey	Not applicable: 97.2% Did not affect academics: 2.8% Received lower grade on exam: 0% Received lower grade in course: 0% Received incomplete or dropped course: 0%	Not applicable: 99.2% Did not affect academics: 0.5% Received lower grade on exam: 0% Received lower grade in course: 0.3% Received incomplete or dropped course: 0%	To determine potential impact of service on student retention

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: COURT OFFENDERS**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2001-2002)	Use of Results
Total number of participants	Attendance	54	71	Determine program impact on student retention
Clarity of presentation content	Counseling & Health Services Outreach Program Evaluation ; Exit Interview	Clear: 90.3% Partially Clear: 7.5% Not Clear: 2.2%	Clear: 88.1% Partially Clear: 8.9% Not Clear: 3%	To maintain useful information
Relevance of content	Counseling & Health Services Outreach Program Evaluation	Relevant: 68.4% Partially Relevant: 25.4% Not Relevant: 6.2%	Relevant: 70.9% Partially Relevant: 24.8% Not Relevant: 4.3%	To make appropriate changes as needed
Preparation of presenter	Counseling & Health Services Outreach Program Evaluation	Prepared: 87.9% Partially Prepared: 9.7% Not Prepared: 2.4%	Prepared: 84.7% Partially Prepared: 14.3% Not Prepared: 1%	To be sure training is appropriate
Change in participant knowledge	Counseling & Health Services Outreach Program Evaluation	Know More: 75.5% Partially Know More: 16.8% Do Not Know More: 7.7%	Data not available	To be sure that content is up to date
Change in participant self-efficacy	Counseling & Health Services Outreach Program Evaluation	Able to Manage Issues: 68.2% Partially Able to Manage Issues: 23.2% Not Able to Manage Issues: 8.6%	Data not available	To change the program to aid in behavior change
Assistance with academic goals	Counseling & Health Services Outreach Program Evaluation	Helps Reach Goals: 41.1% Partially Helps Reach Goals: 30.5% Does Not Help Reach Goals: 28.5%	Data not available	To change the program as needed
Attitude/Behavior change	Prochaska Theory of Change	Moved upward an average of 24.7 points	Moved upward an average of 52 points	To determine positive movement on the continuum
Overall evaluation	Counseling & Health Services Outreach Program Evaluation	Excellent: 54.3% Good: 35.5% Satisfactory: 7.5% Fair: 0.9% Poor: 1.8%	Excellent: 38.9% Good: 52.4% Satisfactory: 3.8% Fair: 2.9% Poor: 2%	Determine adequacy of presentation material
Facilitator comfort with training	Exit Interview	Excellent: 98%	Excellent: 100%	To change training as needed
Number of counties aided in judicial process	County of Referral	14	16	To determine marketing needs

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: ALCOHOLEDU**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2001-2002)	Use of Results
Total number of participants	Client count	73	35	Determine growth of program

Six variables were assessed by Dr. Andrew Wall. The synopsis of his report is included.

Department: COUNSELING & HEALTH SERVICES -- HEALTH EDUCATION**Program: OTHER ALCOHOL/DRUG EDUCATION PROGRAMS**

Outcomes Assessed	Methods Used	Evidence (2006-2007)	Comparative Data (2001-2002)	Use of Results
Participants in Marijuana Education	Participants count	31	11	Determine program impact on student retention.
Participants in Brief Alcohol Screening and Intervention for College Students (BASICS)	Participant count	45	Data not available	Determine program impact on student retention.
Clients needing General Counseling	Client count	7	2	Determine growth of program

Submitted by: _____

Date: _____

Date received in Dean's Office

2006-2007 YEAR END REPORT

COUNSELING & HEALTH SERVICES – OFFICE OF VICTIM SERVICES

Summary of Highlights:

- **Individual Clients** – Provided services to a total of **117** clients through the BSU Office of Victim Services (OVS) and A Better Way during the first full year of operation;
- **Training** – Provided immersive training experiences for 3 graduate assistants who assisted with numerous educational campaigns and victim services; developed and provided training manuals for A Better Way, Muncie Police Department Victim Advocate Program, and BSU Police Department.
- **Services** – provided a full range of advocacy services including crisis intervention and hospital response, **61**; victim advocacy, **60**; legal advocacy, **14**; protective orders, **3**.
- **Educational Programs** – Provided educational outreach programming for **4,850** student participants; initiated two university awareness programs – **Crime Victims' Rights Week** and **Sexual Assault Awareness Month**; developed OVS Website.

Assessment Form for 2006-2007
Ball State University
Division of Student Affairs

Department: COUNSELING & HEALTH SERVICES – OFFICE OF VICTIM SERVICES

Program: CLIENT NUMBERS

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Individual clients at OVS-BSU	Total number of individual receiving advocacy services	'06-'07 data <ul style="list-style-type: none"> Sexual Assault = 25 Domestic Violence = 22 Stalking = 7 Battery/Harassment = 4 TOTAL = 58 	None available. This is the first full year of OVS operation.	Program evaluation; establishing a baseline of data to help with the determination of service needs; explanation of the use of OVS resources.
Individual clients at OVS-A Better Way	Total number of individual receiving advocacy services	'06-'07 data <ul style="list-style-type: none"> Sexual Assault = 1 Domestic Violence = 58 Stalking = 0 Battery/Harassment = 0 TOTAL = 59 	None available. This is the first full year of OVS operation.	

Department: COUNSELING & HEALTH SERVICES – OFFICE OF VICTIM SERVICES

Program: SERVICES PROVIDED

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Services provided at OVS-BSU	Total number and type of services provided	'06-'07 data <ul style="list-style-type: none"> Victim Advocacy = 53 Crisis Intervention and Hospital Responses = 11 Legal Advocacy/Court Accompaniment = 8 Protective Orders = 3 TOTAL = 75 	None available. This is the first full year of OVS operation.	Program evaluation; establishing a baseline of data to help with the determination of service needs; explanation of the use of OVS resources.
Services provided at OVS-A Better Way	Total number and type of services provided	'06-'07 data <ul style="list-style-type: none"> Victim Advocacy = 7 Crisis Intervention 	None available. This is the first full year of OVS operation.	

		<ul style="list-style-type: none"> and Hospital Responses = 50 ▪ Legal Advocacy/Court Accompaniment = 6 ▪ Housing Assistance = 1 ▪ Non-residential Intake = 3 ▪ Transportation provided to clients = 11 ▪ Other-coordinated domestic violence video for client = 1 ▪ TOTAL = 79 		
Services provided at OVS-Delaware County Prosecutor's Office	Total number and type of services provided	'06-'07 data <ul style="list-style-type: none"> ▪ Legal Advocacy/Court Accompaniment (Victim Notification Letters Sent)= 66 	None available. This is the first full year of OVS operation.	

Department: COUNSELING & HEALTH SERVICES – OFFICE OF VICTIM SERVICES

Program: EDUCATIONAL PROGRAMS

Outcomes Assessed	Methods Used	Evidence	Comparative Data	Use of Results
Educational, training and outreach events at OVS-BSU	Total number and type of services provided	'06-'07 Programs <ul style="list-style-type: none"> ▪ Victim Advocacy = 33 ▪ Graduate Assts = 18 ▪ TOTAL = 51 	None available. This is the first full year of OVS operation.	Understanding of students, faculty, staff use of programming; establish baseline of programs used.
Individuals served in educational, training and outreach events at OVS-BSU	Breakdown by total number of participants served in outreach events by category	'06-'07 attendance = 4,850	None available. This is the first full year of OVS operation.	
Educational training provided at OVS-A Better Way	Total number participants	'06-'07 total trained = 4	None available. This is the first full year of OVS operation.	

This completed form must be submitted to your area head and to the VP of the Division. To be included in the 2006-2007 divisional report, this form must be submitted by May 1, 2007.

Submitted by: _____

Date: _____

Date received in Dean's Office

Counseling and Health Services

Counseling Center

Clinical Services

- Responded to 314 crisis or emergency consultations with students, faculty, staff, and parents and conducted an additional 128 crisis/emergency intakes.
- Provided 977 regular intakes and generated over 6,287 individual client hours representing an increase of 1% over last year. Provided 828 psychiatric consultations which represents an increase of 10% from 2006-07.
- The Suicide Tracking program proved to be an effective deterrent to self harm. Implemented in 2005, the program monitors clients who are at risk for self harm. On average, the staff monitored 45 clients per week for a total of 1541 instances of suicide tracking during the academic year.
- Similar to last year, the Counseling Center achieved a client satisfaction rating of 93% for individual counseling; about 34% of students who received counseling in the Center were at risk of leaving/withdrawing from school if they were not provided with treatment. Greater than 85% of these students indicated that counseling helped them stay in school.
- 82% of group therapy clients indicated they felt more compatible with the BSU community as a result of group counseling experience; 91% indicated they were more successful in meeting their personal goals.

Outreach and Consultation

- Provided 842 outreach programs during 2007-08 with a 93.4% good to excellent rating, a decrease of 22 programs from 2006-07. Primary request for outreach comes from faculty who want to supplement course content.
- Provided outreach program contacts for 30,111 participants during 2007-08, a decrease of 18% from 2006-07. The number of programs offered last year was uncharacteristically high and accounts for decrease in participation numbers.

Technology/Testing Programs

- Provided a total of 4478 test administrations that included Computer Based (CBT), Internet Based (IBT), National Saturday, and Counseling Center testing programs. By comparison, 4932 tests administrations were provided in 2007, a decrease of 454 administrations or about 9%. *Changes made by Educational Testing Services (ETS) involved formatting changes that moved some testing such as GMAT and TOEFL from CBT to IBT.*
- Implemented Client Information Management System upgrade to allow for immediate assessment of Client Satisfaction data.

Health Center

Clinical Services

- 26,603 patients were seen at the Health Center. This is an increase over the past three years.
- An online-survey was sent to all residential students this year and nearly 900 students responded. This is the first time an attempt was made to capture students who have chosen not to use the health center at all, and the first time the survey has been online. As has been the case with past surveys, the biggest complaint was the length of time to be seen, with 35% of students saying the wait is too long and 65% reporting that their wait was acceptable or excellent. Forty-eight percent of the students ranked the staff as excellent and 46% as average overall.

Health Education

Campus/Community Health Promotion

- Conducted 238 outreach programs reaching more than 7,172 students, compared to 300 programs serving 9,000 students in 2006-07. The intentional reduction in number of programs was a result of more collaborative programming with the Counseling and Health Services area and across campus.
- Worked with multiple academic departments and community agencies to sponsor 10 nationally recognized health observances.

Educational Programs and Services

- Provided universal precautions trainings to 994 students to equip them for field experiences, compared to 1,000 students in 2006-07.
- Provided nationally recognized substance use diversion programming to 36 students and additional alcohol abuse prevention programming to 2,058 students. These figures are similar to previous years.
- Three discounted nicotine replacement therapy coupons were offered for the first time. To support the smoke-free initiative, coupons will be offered for 2008-09.
- At the conclusion of educational programs, on average:
 - 85.3% of participants reported feeling more able to manage related issues after attending a Health Education program
 - 94.9% of participants reported their overall evaluation of a Health Education program as "Good" or "Excellent"

Victim Services

Client Services and Outreach

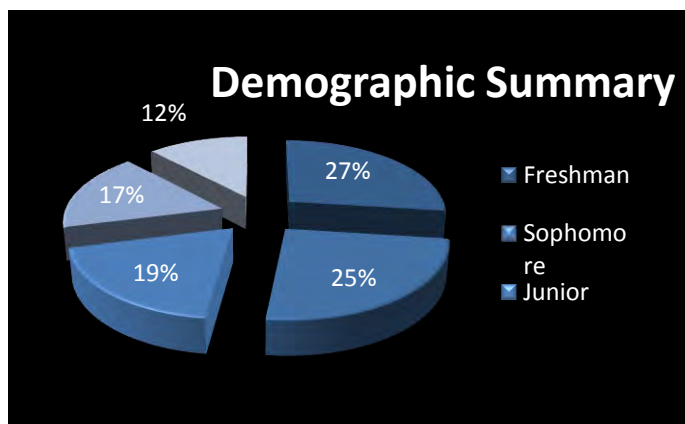
- Conducted 34 events, with a total of 4,263 in attendance.
- Raised awareness through a program offered during Welcome Week to all incoming freshmen on Sexual Assault, Stalking and Domestic Violence.
- Provided training to the Public Safety Department and Muncie Police Department on sexual assault, domestic violence and stalking.

- Provided Sexual Assault Response Protocol Training to all responding Victim Advocates for Delaware County.
- Provided services to a total of 55 clients. Twenty-eight were for sexual assault, 15 for domestic violence, 8 for stalking and 4 were harassment or other.

COUNSELING CENTER

JUNE 2009

Overview of Services



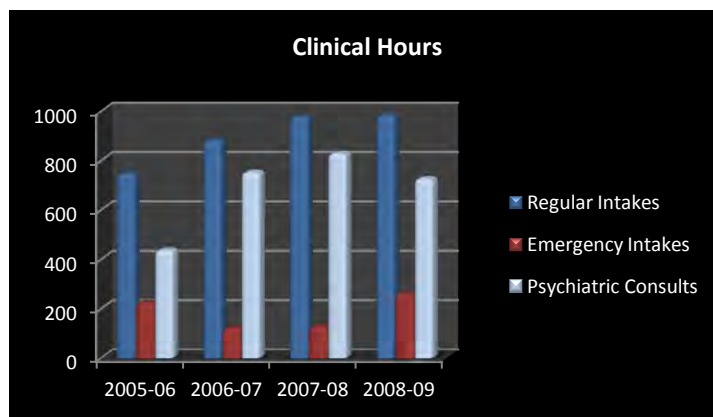
The mission of the Counseling Center is to help students succeed in college by removing barriers to learning, promoting healthy and productive living, facilitating the learning of life skills, and confronting critical problem areas. Roughly 64% of the clients served are females (34% males) who represent all university classifications. Students are referred to the center

in a number of ways including self-referrals, faculty/staff and administrative referrals. Freshmen and sophomores account for over 50% of the intakes. Clients report a 94% satisfaction rating with over 35% of all clients reporting that their counseling experiences helped them to stay in school.

*94% satisfaction
rating with
counseling services*

Clinical Services

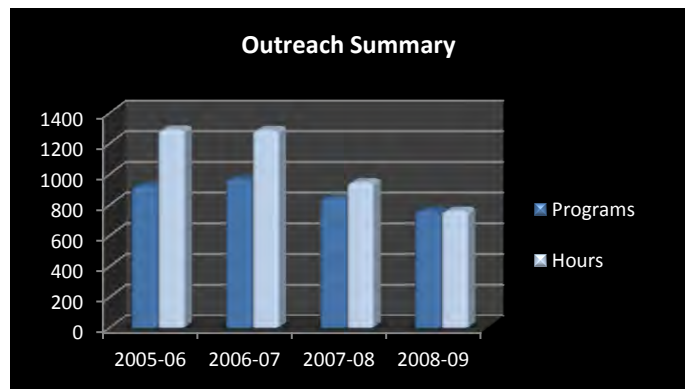
As has been the trend in university counseling centers for the past 15 years, the request for counseling services continues to increase with a corresponding increase in the severity of problems. During the 2008-09 academic year, Counseling Center staff responded to 206 crisis/emergency consultations with students, faculty/staff, and/or parents. Additionally, staff provided 1,277 intakes, offered 6,297 hours of individual counseling, and 726 psychiatric consultations. A total of 14 different small groups were provided which accounted for 427 group therapy contacts. As a deterrent to self-harm, the Suicide Tracking Program monitored at-risk clients. On average, 45 clients were monitored each week for a total of 1,432 instances of suicide



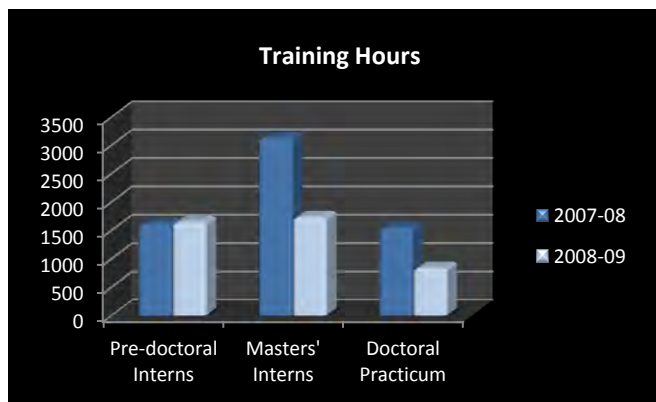
tracking. A total of 35 students were referred through the Self-Harm Protocol and seen for the two-session mandatory assessment. Similarly, 48 students were referred for mandated alcohol assessments, the first year this service has been offered in the Counseling Center.

Outreach Presentations

The Counseling Center outreach teams (Career & Myers-Briggs, Concerned Charlie, Diversity, Eating Disorders, Health Education & Health Psychology, Sexual Assault Prevention/Sexual Responsibility/Relationships, Stress Management, Substance Abuse, and Victims' Advocacy) presented a total of 758 programs during the 2008-09 academic year. The staff as a whole invested a total of 917 hours in outreach activities and made 26,973 student contacts during the various outreach programs. Although comparative data for the past three years indicates that the number of programs and student contacts have actually decreased during this time, the scope and nature of the programming has become more refined and in-depth which has substantially improved the quality.



Training



The Counseling Center staff provided training experiences for three pre-doctoral interns, 10 Masters' interns, and eight doctoral practicum students. Students-in-training contribute to all aspects of Counseling Center work including clinical services, and consultation and outreach. The pre-doctoral interns also assist with the supervision of other trainees. The clinical and outreach service hours provided the interns helps us to better

meet the needs of BSU students. Noting an increase in productivity during 2008-09, the direct service hours generated by each student group is as follows: pre-doctoral interns, 1,642 hours (1,599, 07-08); Masters' interns, 3,120 hours (1,729, 07-08); and doctoral practicum students, 1,525 hours (835, 07-08).

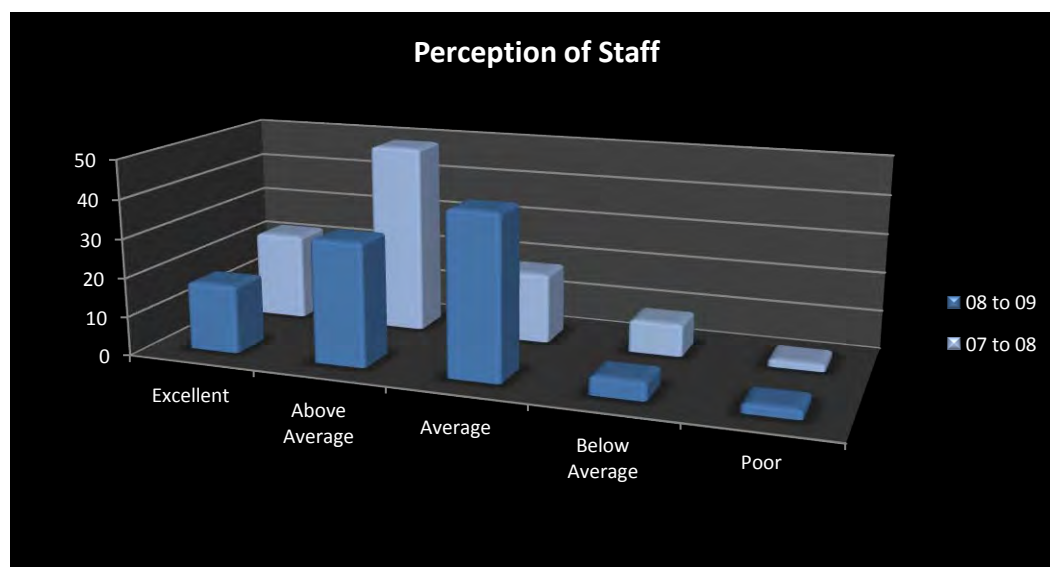
Overview of Services

The Health Center is comprised of 4 units working together to support the physical and mental health of students.

- Urgent Care Clinic
- Women's Center
- Pharmacy
- Physical Therapy

Student Satisfaction

An online survey was used to poll both users and non-users for the second consecutive year. The survey request was sent out through the communications center rather than the all-student email method used last year. This may have contributed to only 520 respondents compared to 839 last year. Of those who did not use the health center, 68% reported they did not need any services offered, 15% reported the hours did not fit their schedule as compared with 4% last year. When asked what hours would be most convenient, 67% reported 4-7 PM. The health center is open 4-7 PM two nights weekly. The most common written request for hours was until midnight and Sundays.



Pharmacy

19,269 prescriptions were filled July 1, 2008 to April 30, 2009, a 9.8% increase over last year.

Clinical Services

Students made 25,290 visits to the health center from July 1, 2008 to April 30, 2009, a 26% increase over the previous year. These visits were accomplished with the same number of staff and probably contributed to the perception, and reality, of a longer wait time. A new procedure was put into place for triage.

Whenever the wait time stretched longer than 15 minutes, a nurse evaluated each patient upon arrival. This resulted in students who needed services more urgently or services we were not able to provide being identified more rapidly.



*26% increase in
overall volume*

International Students

International students were seen en masse during the first week of school to complete their mandated tuberculosis screening. Previously students came individually throughout the semester. Students reported a greatly improved experience with this change.

HEALTH EDUCATION

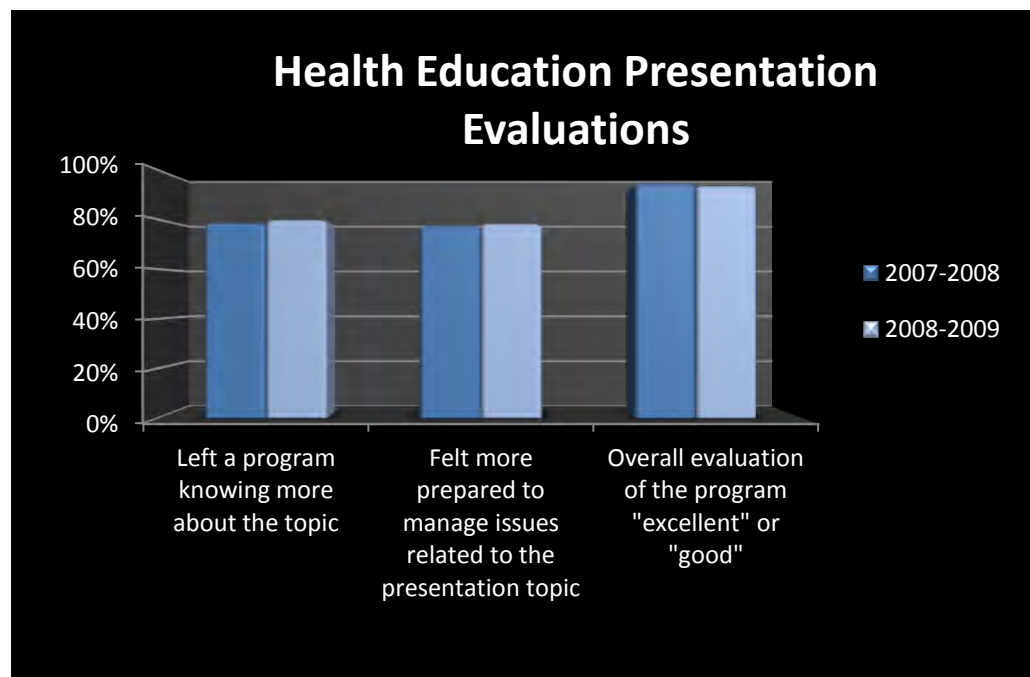
JUNE 2009

Outreach Programs

Outreach programs dealing with health-related issues such as sexual health, sexual responsibility, nutrition, and substance abuse are performed as requested by student organizations, resident advisors, and faculty/staff. Outreach programs are oriented towards prevention, student development, and wellness. The mission is to assist students in reaching their personal and educational goals and removing barriers to learning.

The number of outreach programs conducted by Health Education in 2008-2009 was 139. This is down compared to 238 programs conducted in 2007-2008. One large contributing factor to this decrease is that Health Education was without a Health Educator from October 2008 to February 2009. However, the number of students reached through outreach presentation rose in relation to the number of programs conducted. 5,547 students were reached in 139 outreach presentation in 2008-2009 compared to 7,172 students reached through 238 programs in 2007-2008. This relates to an average of almost 40 students reached per outreach presentation in 2008-2009 compared to an average of 30 students reached per outreach presentation in 2007-2008.

Evaluations of Health Education programs remained highly positive as shown in the chart to the right. On average, 80.1% of participants reported leaving a program knowing more about the topic. In addition, 78.6% of participants felt more prepared to manage issues related to the presentation topic. Moreover, 93.9% of participants reported their overall evaluation of a Health Education program as “excellent” or “good.”



Sexual Health and Responsibility

The Health Education office provided about 11,000 condoms on the Ball State University campus through the office in the Student Health Center, at presentations, and at campus wide events. The office also provided 39 syphilis tests and 67 HIV tests free and anonymously (student's names are never asked or recorded) through the Delaware County Health Department in the 2008-2009 academic year.

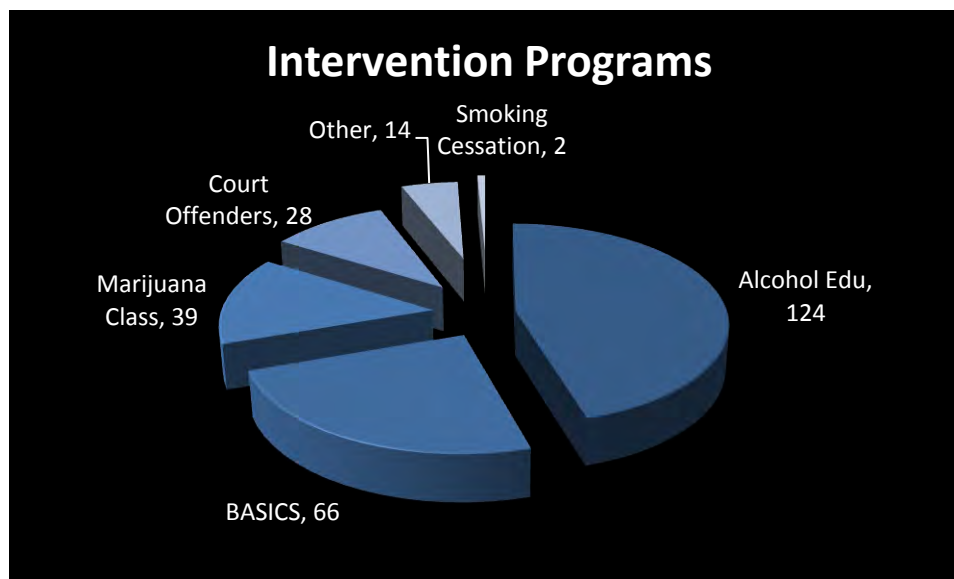
Peer Health Educators

Health Education continues to provide immersive learning opportunities for Ball State University students. Thirty six peer health educators participated in 25 outreach programs reaching 1,800 Ball State University students in the 2008-2009 academic year. Peer health educators gain valuable experience by coordinating and implementing a variety of health education programs for their fellow university students. Students from any department are welcome to participate in the program.

Peer Health
Educators
reached 1,800
Ball State
students

Other Services

Health Education presented blood borne pathogen and universal precaution trainings to 356 students in 2008-2009 to prepare them for out-of classroom learning opportunities. Health Education also provided five intervention programs to students: Court Offenders,



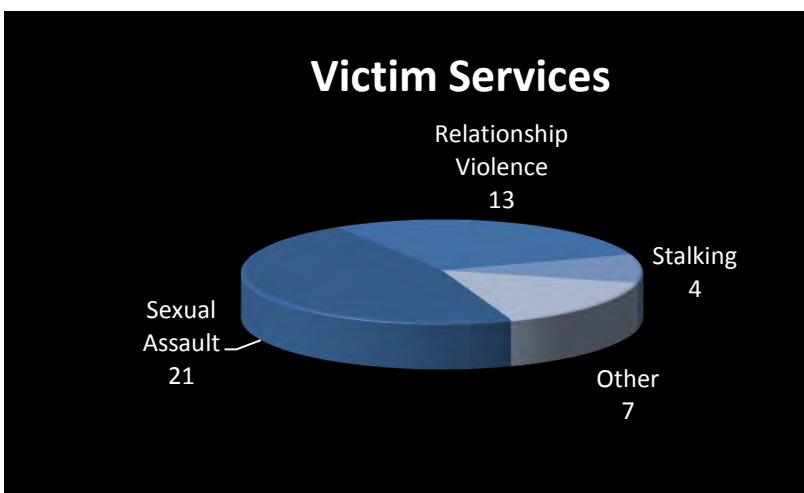
Smoking Cessation, Alcohol Edu, Brief Alcohol Screening and Intervention for College Students (BASICS), and a Marijuana class. The total number of students reached through these five classes in 2008-2009 was 273. The chart to the left indicates the number of students in each intervention program.

OFFICE OF VICTIM SERVICES

JUNE 2009

Comprehensive Services

The Office of Victim Services provides comprehensive services to campus and community resources for students, faculty, and staff who have been victimized. This includes, but is not limited to physical and sexual assault, relationship violence, and stalking. The program is designed to assist individuals in the recovery process by providing timely information and confidential support and guidance through the campus judiciary and criminal justice systems. The graph illustrates the number of students, faculty, and staff who have received services from the office and their victimization type.



*128 victim
advocacy
services*

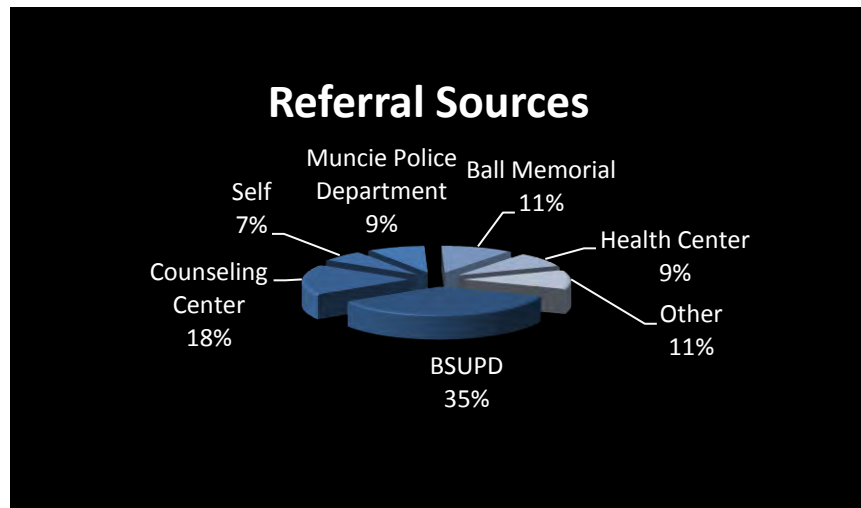
45 total clients received services from the Office of Victim Services. The Victim Advocate averages approximately two to three contacts per client.

Outreach Initiatives

The Office of Victim Services continues to increase outreach and violence prevention initiatives to increase students' education and awareness. The office focuses on three national awareness campaigns: April-Sexual Assault Awareness Month, October-Domestic Violence Awareness Month, and January-Stalking Awareness Month. A total of **39** events were conducted during these months, resulting in a total of **1975** in attendance.

Referral Sources

Clients are referred to the Office of Victim Services by a variety of departments. The graph below indicates the breakdown of referral sources.



Experiential Learning/Training

The Office of Victim Services provides a valuable learning experience to students who are interested in volunteering with newly implemented Peer Victim Advocate program. **15** students have been completed 80 hours of intense training during the Spring 2009 semester, and will be available to respond in the Fall 2009 semester. The Peer Victim Advocacy training is comprised of a web based module, two seminars, a research paper and presentation, as well as criminal justice observation with the courts and police. The training provides the students with the ability to know how to appropriately respond to their peers. In addition, the Office of Victim Services provides violence prevention and victim advocacy training to specific groups on campus as well as in the community, such as Ball State University Public Safety Department, Muncie Police Department, and Delaware County Sexual Assault Nurse Examiners.

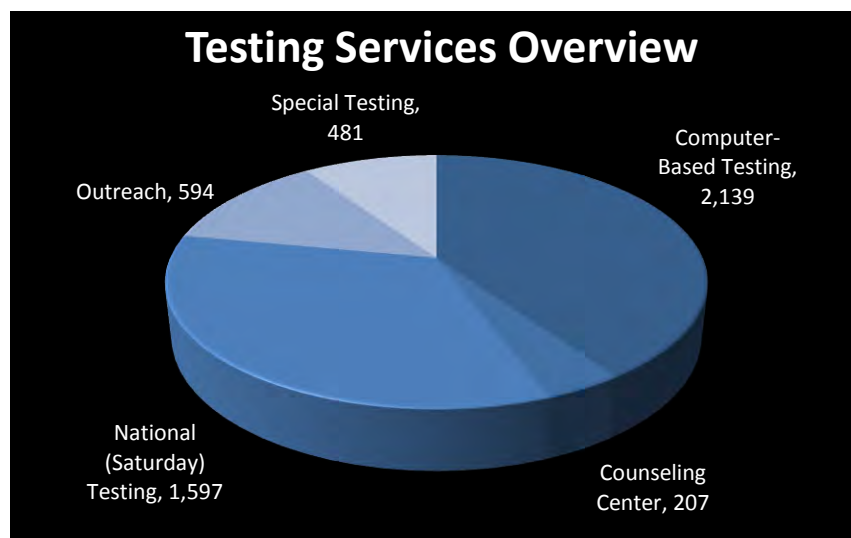
OFFICE OF TESTING PROGRAMS

JUNE 2009

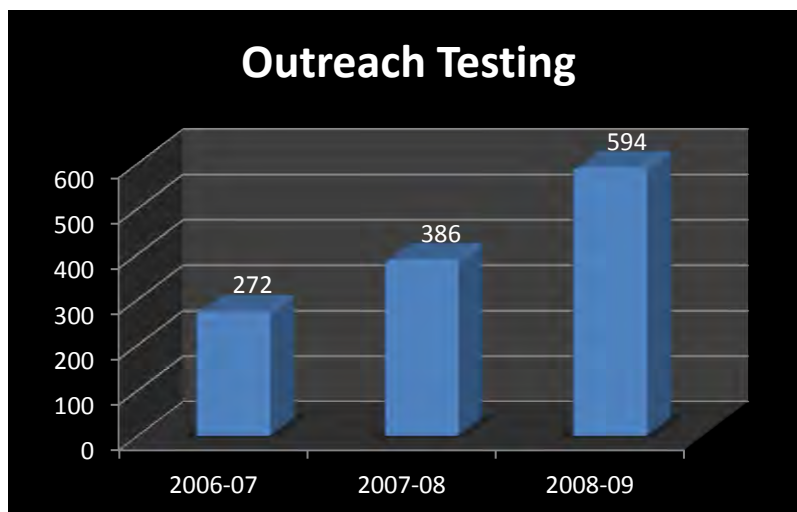
Testing Services

The computer-based testing program continues to remain the leader among testing services comprising 40% of all services provided. An increase from 1,815 in 2007-08 to 2,139 in 2008-09 can be attributed to a change in our operating schedule. Beginning mid Fall Semester 2008, evening and weekend hours were added to the existing schedule to better

accommodate the needs of students. No longer are students required to complete examinations during university business hours. The National (Saturday) testing programs continue to remain steady with only a slight increase from 1,518 in 2007-08 to 1,597 in 2008-09. Both the computer-based and national testing programs are integral to students for admission to graduate and professional schools/programs as well as teacher licensing.



Outreach Testing Services




As part of the Counseling Center's outreach program, selected assessments are administered to students at the request of faculty members or course instructors. Instruments such as the Myers-Briggs Type Indicator, the Strong Interest Inventory, etc. are used as an adjunct to the outreach presentation. Outreach testing

continues to increase dramatically as additional faculty and instructors incorporate these outreach programs as a recurring event in their curriculum. In 2008-09, 594 students completed assessments as part of an outreach program; up from 386 students in 2007-08. The chart indicates this steady upward trend in outreach assessment.

New Testing Relationship

During 2008-09, the Office of Testing Programs began administering assessments for the BSU School of Nursing. These students who are identified as “at-risk” are assessed using both the Test of Essential Academic Skills (TEAS) test as well as specific assessments from the National League for Nursing. This effort is to help identify areas of difficulty for these students in an effort to increase retention.



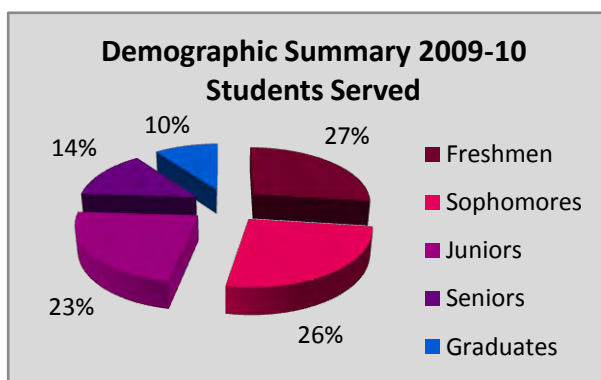
*94 exams were
administered in an
effort to assist
nursing students*

COUNSELING CENTER

2009-2010

Overview of Services

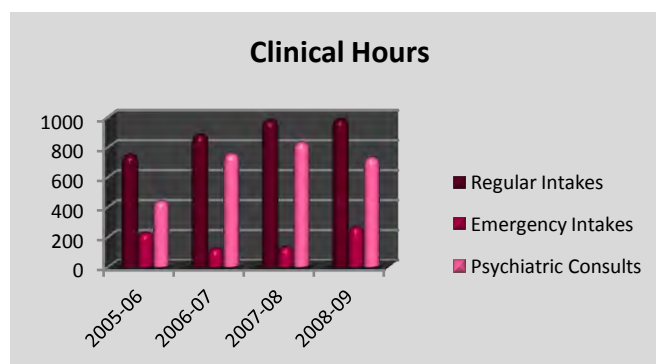
The Counseling Center contributes to the overall university mission by offering programming and services that enhance students' educational experiences. Striving to meet the psychological needs of the Ball State University community, the primary mission of the Center is to assist students in reaching their educational goals and to improve their overall quality of life. The Center provides a number of professional services including: individual and group counseling; consultation and outreach programs; institutional testing; and professional training for selected Masters and Pre-Doctoral level interns.



Clinical Services

Although both Ball State and national trends have shown a significant increase in the number and severity of students with mental health problems over a 15-year period, there seems to have been a stabilization of BSU student requests during the past two years. Consistent with the previous year's data, Counseling Center staff responded to 205 crisis/emergency consultations with students, faculty/staff, and parents during the 2009-10 academic year.

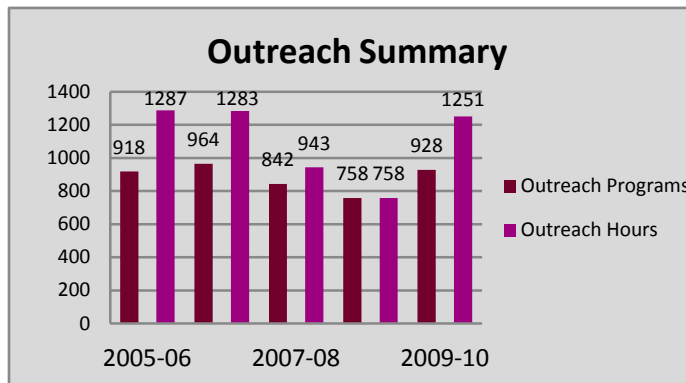
Additionally, staff provided **1,212** intakes, offered **6,555** hours of individual counseling, and **689** psychiatric consultations. A total of **14** different small groups provided **134** clients with group therapy experiences. As a means of trying to accommodate clients more quickly, "Cope Groups" were offered as a different group format to provide ready access for clients. Also, as a deterrent to self-harm, the Suicide Tracking Program monitored 88 at-risk clients during the year. A total of **14** students were referred through the Self-Harm Protocol and seen for the two-session mandatory assessment, down from 35 the previous year. On the other hand, with a significant change in alcohol assessment programming available in the Counseling Center,



**97% satisfaction
rating with
counseling services**

alcohol assessment referrals continued to prove beneficial for students and the university community. A total of 84 students were referred for mandated alcohol assessments in the Counseling Center, a 75% increase from 48 students the previous year.

Outreach Presentations

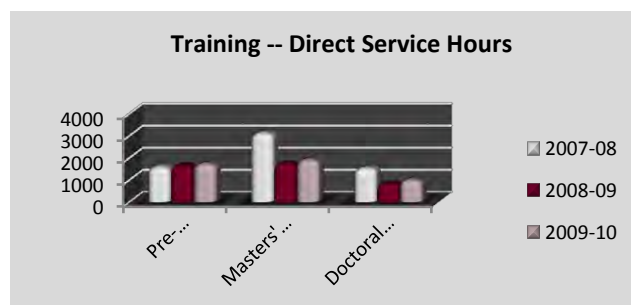


Following two years of decline in numbers, a summary of the Counseling Center outreach data reveals an increase in the numbers of programs and staff hours. The Counseling Center outreach teams (Career & Myers-Briggs, Concerned Charlie, Diversity, Eating Disorders, Health Education, Sexual Assault Prevention/Sexual Responsibility/Relationships, Stress Management, Substance Abuse, and

Victims' Advocacy) presented a total of 928 programs during the 2009-10 academic year; and the staff invested 1,251 hours in programming that included 28,040 student contacts. Of particular significance this year, 85% of participants reported that outreach programming would partially or significantly enhance their BSU experience. About half, 46% of students indicated that programming would help them reach their academic goals.

Training

During 2009-10, one of the most significant accomplishments for the Counseling Center was the re-accreditation of the Pre-Doctoral Training Program by the American Psychological Association. The accreditation site visit was held during June 2009 and resulted in the Center



receiving a seven (7) year reaccreditation. The Counseling Center staff provided training experiences for three pre-doctoral interns, 10 Masters' interns, and eight doctoral practicum students. The Counseling Center trainees continue to provide a significant number of direct service hours in all aspects of service including clinical services, and consultation and outreach. With the

additional service hours from the training programs, we are better able to meet students' needs. Being directly related to the number of trainees, and noting a modest increase from the previous year, the direct service hours generated are as follows: pre-doctoral interns, 1,721 hours (1,642, 08-09; 1,599, 07-08); Masters' interns, 1,908 hours (3,120, 08-09; 1,729, 07-08); and doctoral practicum students, 997 hours (835, 08-09; 1,525, 07-08).

**Training Program
Reaccredited for
seven years by
APA June 2009**

Overview of Services

The Health Center is comprised of four units working together to support the physical and mental health of students.

- Urgent Care Clinic
- Women's Center
- Pharmacy
- Physical Therapy

Student Satisfaction

An online survey was used to poll both users and non-users for the third consecutive year. This was the second year the survey request was sent to students through the communications center. 398 students participated in the survey compared to 520 last year and 839 the previous year. The dominant theme of requested services was evening and weekend hours.



Pharmacy

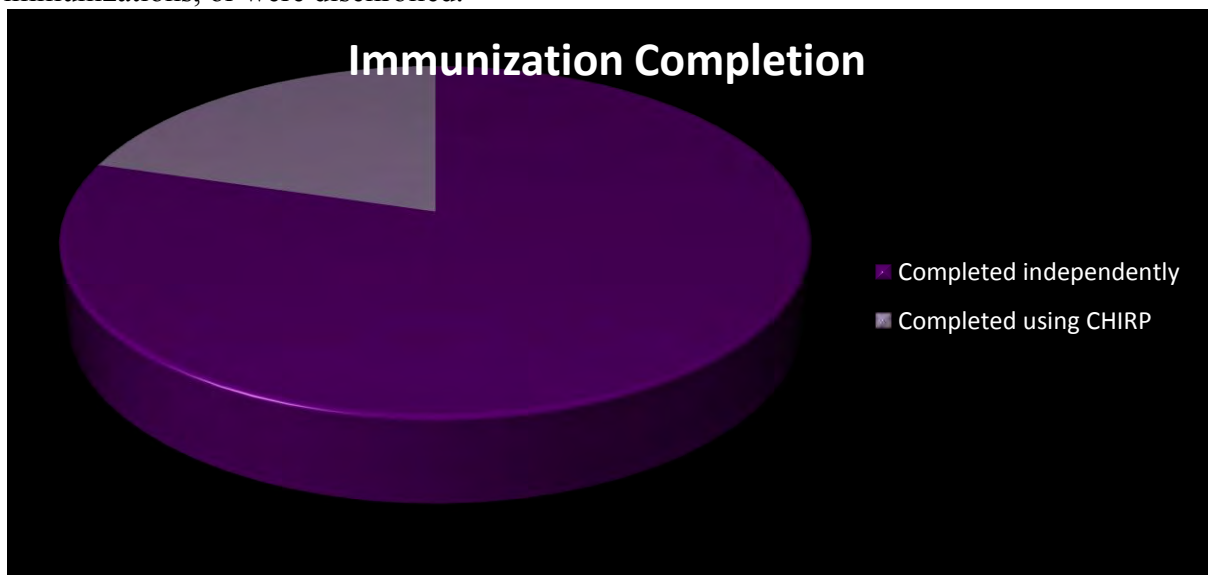
19,147 prescriptions were filled during the year, very little change from 19,269 the previous year.

Clinical Services

The Health Center had an unfilled physician position from July of 2009 until March of 2010. The staff began to deal with an increasing number of international students with poor English skills. In spite of these challenges students made 25,418 visits to the health center, a slight increase from 25,290 during the same period last year.

State Immunization Requirements

Ball State University complies with public health laws requiring documentation of certain immunizations to protect the University community from disease. The process of procuring these documents, oftentimes 15 or more years old, can be daunting for students. Over the last year the Ball State Health Center fulfilled requirements to obtain access to the Children and Hoosiers Immunization Registry Program. Using this system, the health center was able to complete the immunization records of 612 out of 3006 students required to comply with the law. In previous years, these students would have received periodic notices until they either presented documentation, repeated their immunizations, or were disenrolled.



HEALTH EDUCATION

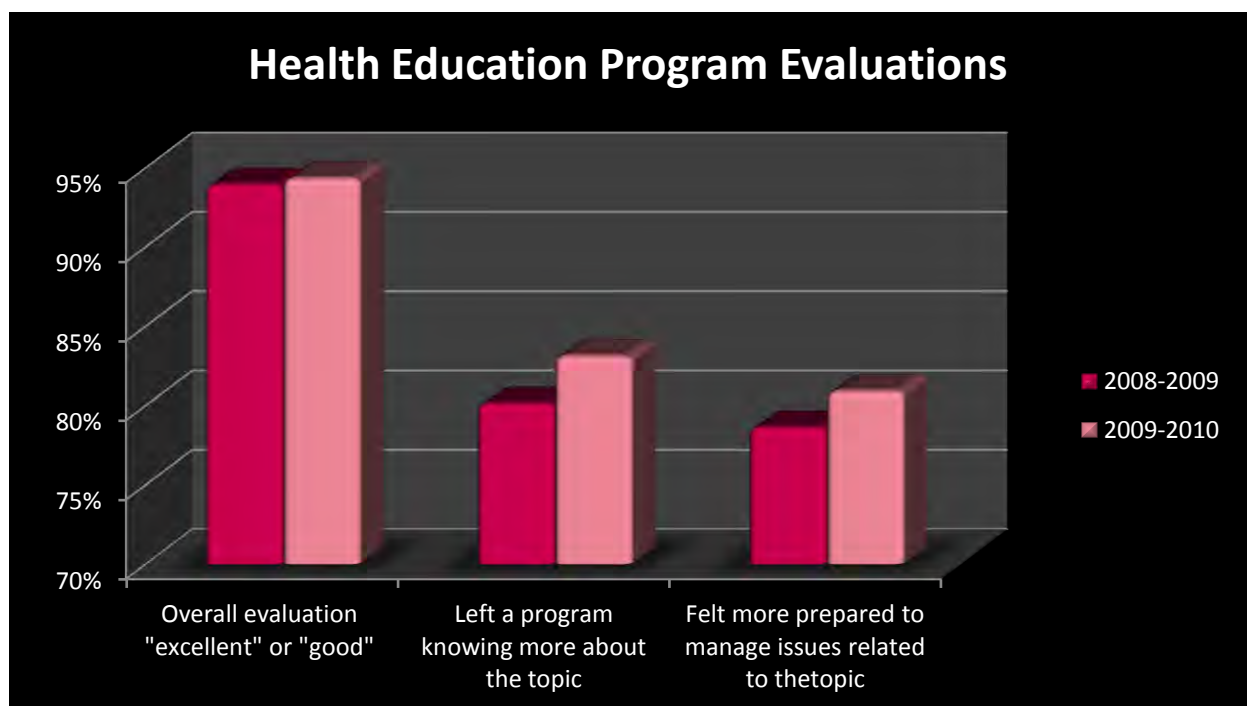
JUNE 2010

Outreach Programs

Outreach programs dealing with health-related issues such as sexual health, sexual responsibility, nutrition, and substance abuse are performed as requested by student organizations, resident advisors, and faculty/staff. Outreach programs are oriented towards prevention, student development, and wellness. The mission is to assist students in reaching their personal and educational goals and removing barriers to learning.

The number of outreach programs conducted by Health Education in 2009-2010 was 283. This is up from 139 programs in 2008-2009 when Health Education was without a Health Educator from October 2008 to February 2009. Outreach program numbers also increased from the 238 programs conducted in the 2007-2008 academic year. This year, 283 outreach programs reached 7,182 students. This is up from 5,547 students reached in 2008-2009 and also slightly increased from the 7,172 students reached through 238 programs in 2007-2008.

Evaluations of Health Education programs remained highly positive as shown in the chart below. On average, 83.1% of participants reported leaving a program knowing more about the topic. In addition, 80.9% of participants felt more prepared to manage issues related to the presentation topic. Moreover, 94.3% of participants reported their overall evaluation of a Health Education program as “excellent” or “good.”



Awarded
\$2,244 grant for
Party Smart
BSU! program

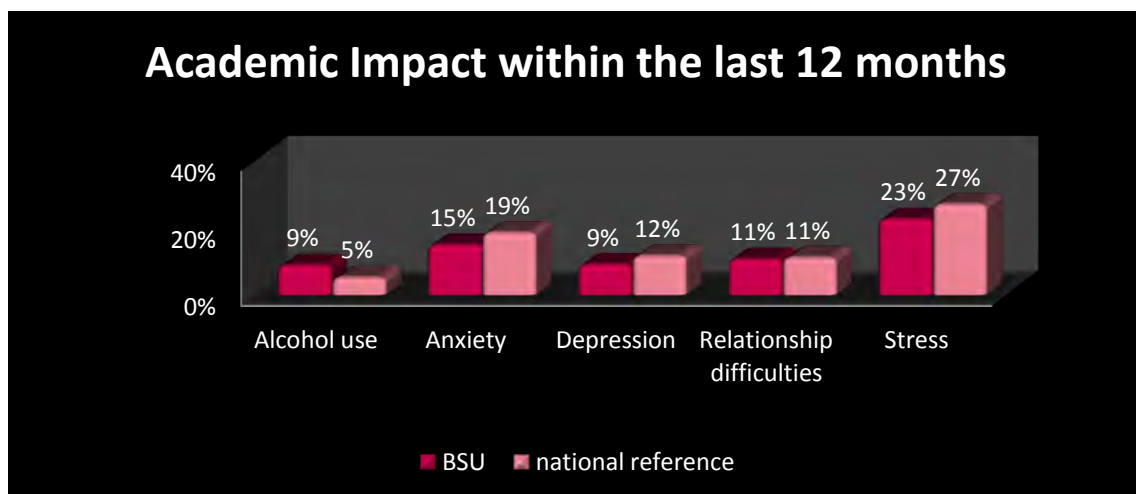
Party Smart BSU!

Health Education was awarded a \$2,244 grant from the Delaware County Coordinating Council to Prevent Alcohol and Other Drug Abuse for the Party Smart BSU! program in 2009. Party Smart BSU! is an alcohol education and awareness campaign to help Ball State University student's party responsibly without endangering themselves or anyone else. Kits include tips on how to hold a successful smart party and attending a party. Laminated cards inform of ways to spot alcohol poisoning and what to do if someone is suspected of having alcohol poisoning. Brochures also discuss local laws on alcohol, minor consumption, and providing minors with drinks; and recipes for food and mocktails. A "Party Smart BSU!" t-shirt, condoms, and snack clips were also included.

Two hundred Party Smart kits were handed out at two fall 2009 semester events: the Activities Fair and the Homecoming Bed Races. Students earned the Party Smart kits by playing the educational game "Alcohol Tic Tac Toe" or answering correctly at least three questions related to alcohol use and/or partying smart.

American College Health Association— National College Health Assessment

Findings from the Spring 2009 ACHA—NCHA were presented by Health Education professional staff at the 2010 Student Affairs Spotlight on Research on March 25th, 2010. The assessment used a representative sample of 806 Ball State University students; collecting data about students' habits, behaviors, and perceptions on various health topics. In general, Ball State University students' health was on par with the reference group of 87,105 college students nationwide.

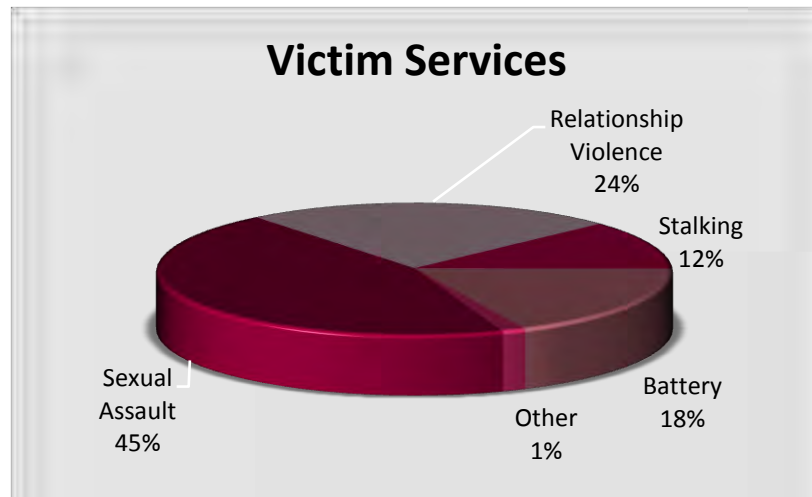


OFFICE OF VICTIM SERVICES

2009-2010

Comprehensive Services

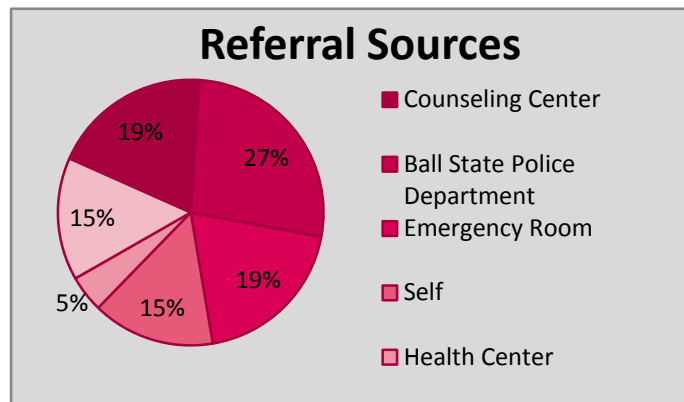
The Office of Victim Services provides comprehensive services to campus and community resources for students, faculty, and staff who have been victimized. This includes, but is not limited to physical and sexual assault, relationship violence, and stalking. The program is designed to assist individuals in the recovery process by providing timely information and confidential support and guidance through the campus judiciary and criminal justice systems. The pie chart reflects the percentage of clients served according to their victimization type.



A total of 67 total clients received services from the Office of Victim Services. The Victim Advocate averages approximately two to three contacts per client.

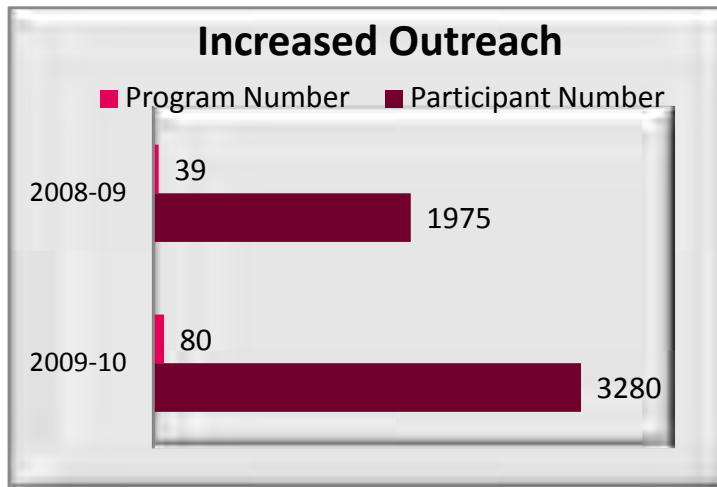
Referral Sources

Clients are referred to the Office of Victim Services by a variety of departments. The graph below indicates the breakdown of referral sources.



Outreach Initiatives

The Office of Victim Services continues to increase outreach and violence prevention initiatives to increase students' education and awareness. The office focuses on three national awareness campaigns: April-Sexual Assault Awareness Month, October-Domestic Violence Awareness Month, and January-Stalking Awareness Month. A total of **80** events were conducted during these months, resulting in a total of **3280** in attendance.



Walk a Mile in Her Shoes
held to engage and unite men
against violence

Experiential Learning

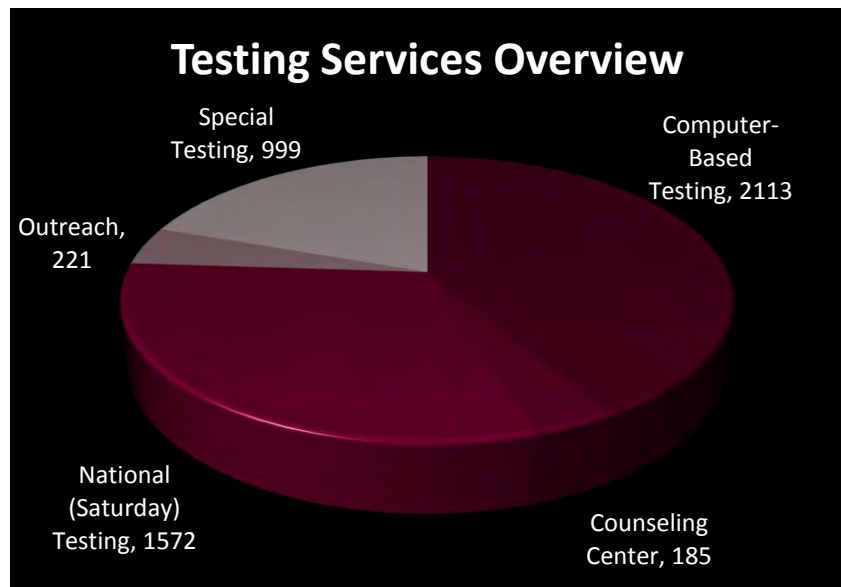
The Office of Victim Services provides a valuable learning experience to students who are interested in volunteering as a Peer Victim Advocate. Currently, the team consists of 9 existing members and 6 new recruits who are completing 80 hours of training. The existing members volunteer a minimum of 20 hours of service each month by responding to Ball Memorial Hospital, conducting violence prevention outreach presentations to their peers, attending Peer Victim Advocate meetings and ongoing training sessions. The Peer Victim Advocacy training is comprised of a web based module, two seminars, a research paper and presentation, as well as criminal justice observation with the courts and police. Upon completion of their training, peer victim advocates provide advocacy services by responding after hours to Ball Memorial Hospital, as well as presenting violence prevention outreach programs to their peers.

OFFICE OF TESTING PROGRAMS

JUNE 2010

Testing Services

The computer-based testing program experienced a slight decline this year; from 2,139 in 2008-09 to 2,113 in 2009-10. The computer-based testing program continues to comprise 40% of all testing services provided by the Office of Testing Programs. The National (Saturday) testing programs remain steady with a slight decrease from 1,597 in 2008-09 to 1,572 to 2009-10 comprising 30% of all testing services. Both the computer-based and national testing programs are integral to our students for admission to graduate and professional schools/programs as well as teacher licensing.



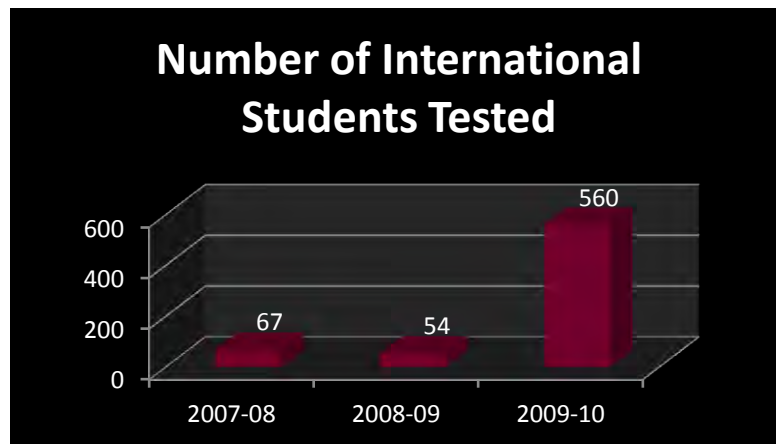
Outreach Testing Services

As part of the Counseling Center's outreach program, selected assessments are administered to students at the request of faculty members or course instructors. Instruments such as the Myers-Briggs Type Indicator are used as an adjunct to the outreach presentation.

In 2009-10, 221 students completed assessments as part of an outreach program; down from 594 students in 2008-09. A decline in requests to utilize these instruments in the class curriculum in addition to rising costs have certainly affected the number of students participating in outreach testing in 2009-10.

International Student Testing

The COMPASS placement assessments as well as the Institutional TOEFL (Test of English as a Foreign Language) are administered by the Office of Testing Programs to the international student population as a measure of placement and proficiency in English. Efforts to increase international admission at Ball State have had a dramatic effect in terms of the number of students required to take these assessments. Prior to this past year, an average of sixty international students per year were tested for placement and proficiency. As the chart indicates, this number has increased tremendously with 560 students tested in 2009-10.



COUNSELING CENTER

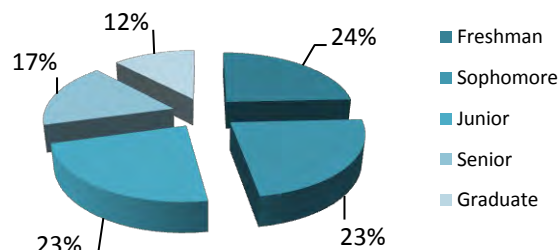
2010-2011

Overview of Services

The Counseling Center contributes to the overall university mission by offering programming and

services that enhance students' educational experiences. Striving to meet the psychological needs of the Ball State University community, the primary mission of the Center is to assist students in reaching their educational goals and improve the overall quality of life. The Center provides a number of professional services including: individual and group counseling; consultation and outreach programming; institutional testing; and professional training for selected Masters and pre-doctoral level interns. The Center also

**Demographic Summary
2010-2011**



received two grants—\$800 from the Indiana Campus Action Network and \$10,000 from Avon. Of particular note during 2010-11, the Counseling Center was reaccredited for an eight year period by the International Association of Counseling Services. IACS accreditation denotes a board evaluated and fully functioning counseling service available within the BSU community.

BSU Counseling Center
reaccredited for eight
years by International
Association of Counseling
Services, 2010

Clinical Services

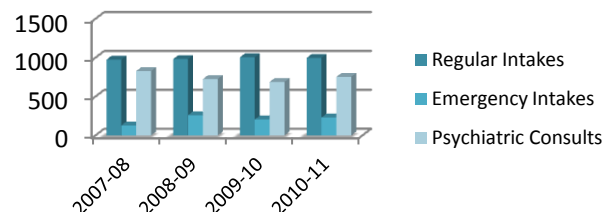
The national trend of increasing severity of clients continues to be the norm at the Ball State

Counseling Center. Although there is only a slight increase in the numbers of students seen for services this year, the complexity of students' presenting problems continues to increase. Similar to the previous year's data, Counseling Center staff responded to **201**

crisis/emergency consultations with students, faculty/staff, and parents during 2010-11. Additionally, staff provided **1,229** intakes, offered **6,054** hours of

individual counseling, and **754** psychiatric consultations. A total of **18** different small groups provided **271** clients with group therapy experiences. The number of clients served in therapy groups increased by 102% from the 134 clients who participated in groups during 2009-10. As a deterrent to self-harm, **123** clients were monitored through the Suicide Tracking Program which represents a 40% increase from the 88 clients monitored during 2009-10. The increase in suicidal

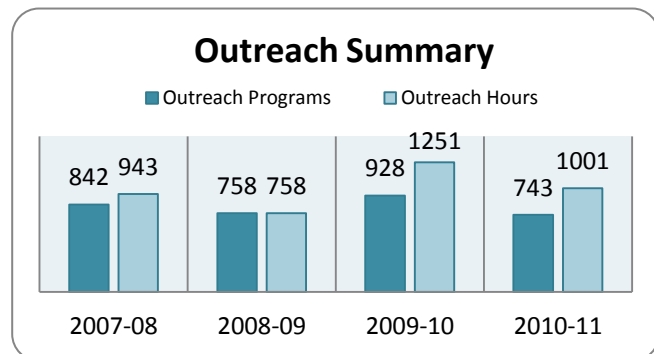
Clinical Hours



ideation is also indicative of the previously mentioned increasing severity. Additionally, a total of **32** students were referred through the Self-Harm Protocol and seen for the mandatory two-session assessment, up from 18 the previous year. Although it is difficult to determine the cause, the number of students who were referred for mandatory alcohol assessments in the Counseling Center decreased from 84 in 2009-10 to 33 during 2010-11.

Outreach Presentations

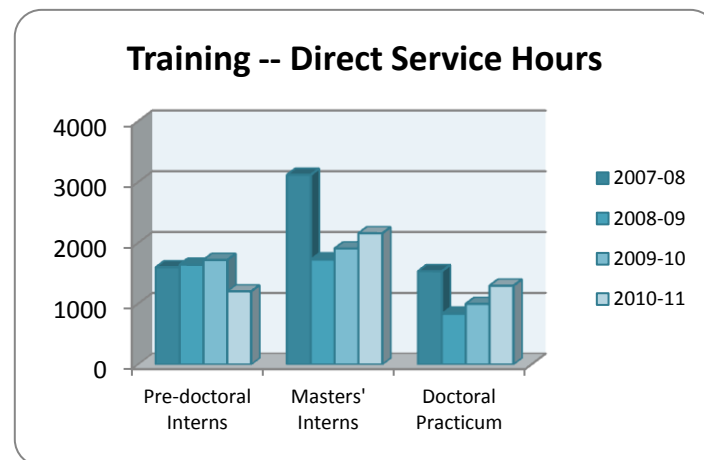
Counseling Center staff provided **743** outreach programs during 2010-11. Although this number represents a decline in the number of programs from the previous year (928), the total number of student contacts increased by 8.2%, from 28,040 to **30,362**. Of the students who participated in these outreach programs, 83% reported that these outreach programs will help them to reach their academic goals. Further, 92% reported believing that outreach programs will enhance their BSU experience.



The Counseling Center staff also offered two highly successful campus-wide awareness programs – Eating Disorders Awareness Week and Sexual Assault Awareness Month. Two other programs that continued to have success throughout the year included the drop-in Resource Room that served an additional 136 students; and the on-line question and answer Concerned Charlie which responded to 26 student concerns but received 2,997 website hits.

Training

Reaccredited during 2009-10, the Counseling Center APA pre-doctoral training program



continued to attract interns from different parts of the country. Maintaining the Counseling Center training program allows for a much greater impact in meeting the psychological needs of clients. The Counseling Center staff provided training experiences for three pre-doctoral interns, eight Masters' interns, and nine doctoral practicum students. The Counseling Center trainees provide a significant number of direct service hours in all aspects of

service including clinical services, and consultation and outreach. With the additional service hours from the training programs, we are better able to meet students' needs. the direct service hours generated are as follows: pre-doctoral interns, **1,203** hours, 10-11 (1,721, 09-10; 1,642, 08-09; 1,599, 07-08); Masters' interns, **2,158** hours, 10-11 (1,908, 09-10; 3,120, 08-09; 1,729, 07-08); and doctoral practicum students, **1,296** hours, 10-11; (997, 09-10; 835, 08-09; 1,525, 07-08).

Assessment

The Counseling Center assessment project was designed to directly assess what Counseling Center clients learned from their counseling experiences as related to a specific learning outcome (LO-1). Individual counseling services, one of the Center's major functions, was the primary focus for this year's assessment project. It is anticipated that other counseling service functions will be targeted for assessment in subsequent years. The goal of the project was to ascertain more definitive information about how counseling impacted student learning. Understanding more specifically what students learned from their counseling experiences was considered desirable in helping us to become more intentional about program development and/or improvement.

Project Goals

1. To determine what psychological skills are being taught through the counseling experience.
2. To determine the extent to which Counseling Center staff is effective in teaching psychological skills.
3. To determine how competent students feel about the life skills gained through participation in counseling.

Key Findings

1. There is a significant correlation between the number of counseling sessions clients attended and the perceived benefit from counseling. Correlation is significant at the 0.01 level.
2. There is a significant correlation between the number of counseling sessions attended and: (a) learning more coping strategies, $p < 0.01$; (b) gaining a greater self understanding and identity, $p < 0.01$; and (c) making positive changes in one's life, $p < 0.05$.
3. The more counseling sessions clients attended the more ways they learned to: (a) cope with anxiety, $p < 0.01$; and (b) deal with depression, $p < 0.05$.
4. There was no significant correlation between the number of counseling sessions attended and improved academic performance, $p > 0.05$.
5. Although seniors were expected to demonstrate more competence in life skills, there was no significant difference in student learning by academic classification on any of the variables studied, $p > 0.05$.

HEALTH CENTER

2010-2011

Overview of Services

The Health Center is comprised of four units working together to support the physical and mental health of students: Urgent Care Clinic, Women's Center, Pharmacy and Physical Therapy.

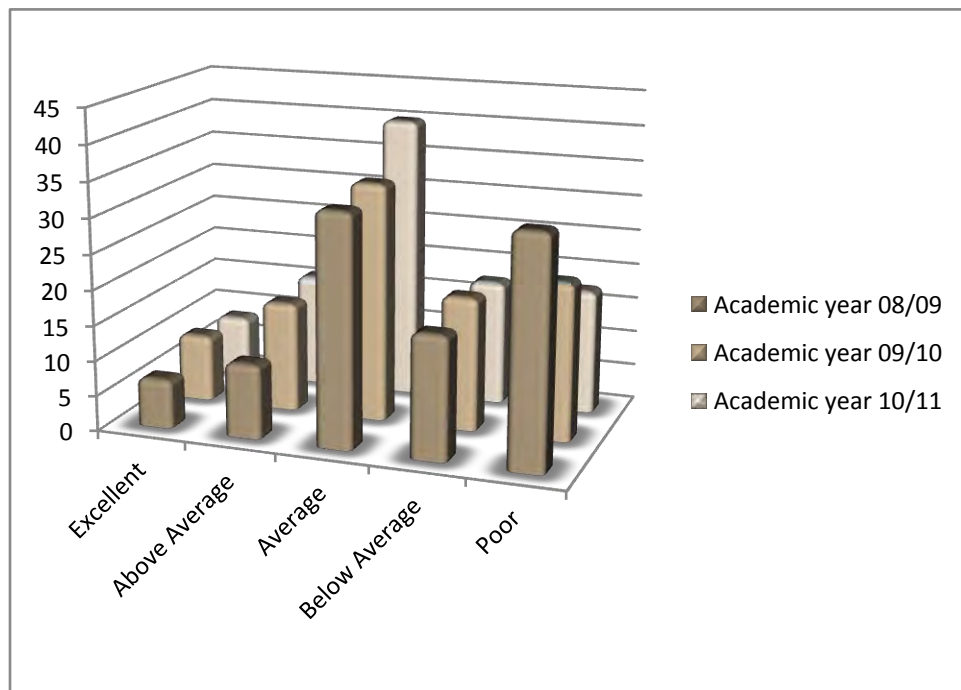
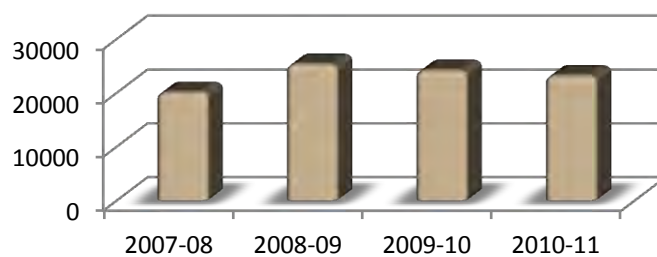
These units had 23154 visits with students this year.

Student Satisfaction

For the fourth consecutive year, an online survey was used to poll both users and non-users of the Health

Center. This year 783 students responded compared to 398 last year. 135 respondents had not used the health center, of those, 72% reported they had not needed any services provided by the Health Center. 92% of students using the Health Center rated the physicians as average or better and 57% rated them as above average or excellent.

Annual Visits



The wait time to be seen is a persistent factor in overall student satisfaction, and is challenging to improve due to limitations related to the physical facility and budgetary factors. Over the last 3 years there is a trend

toward a better perception of the wait time, probably related to persistent efforts to streamline our efficiency.

Pharmacy

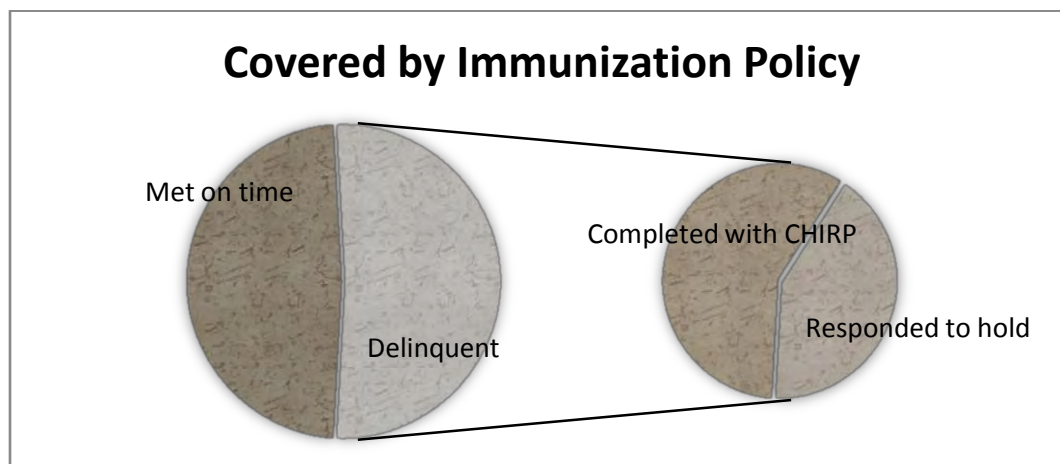
Historically the business model used by the pharmacy has been to sell medications with very little mark-up and to keep the pharmacy open and staffed on a schedule similar to university business offices. This approach has led to a steadily worsening loss. In response to budget pressure, a decision was made at the beginning of this year to close the pharmacy during breaks. This has been successful in allowing the pharmacy to remain open at a break even budget and has resulted in few minor inconveniences for students. In spite of these closures the pharmacy filled 18834 prescriptions, compared to 19147 last year.

Serving International Students

The expansion of the International English Institute program has resulted in a dramatic increase in the number of students with poor English skills using the Health Center. Close collaboration with Rinker Center staff and the implementation of a telephone-based translation service has seemed to improve the experience of International Students.

State Immunization Requirements

Ball State University complies with public health laws requiring documentation of certain immunizations to protect the University community at large. Providing this documentation is a burden for many students. Last year, the Health Center was able to use information from the Children and Hoosiers Immunization Registry Program to help complete 612 records. This year 3655 students were covered by the policy. As of the beginning of October 1890 students had not complied with the policy and 1100 of those records were completed with this program.

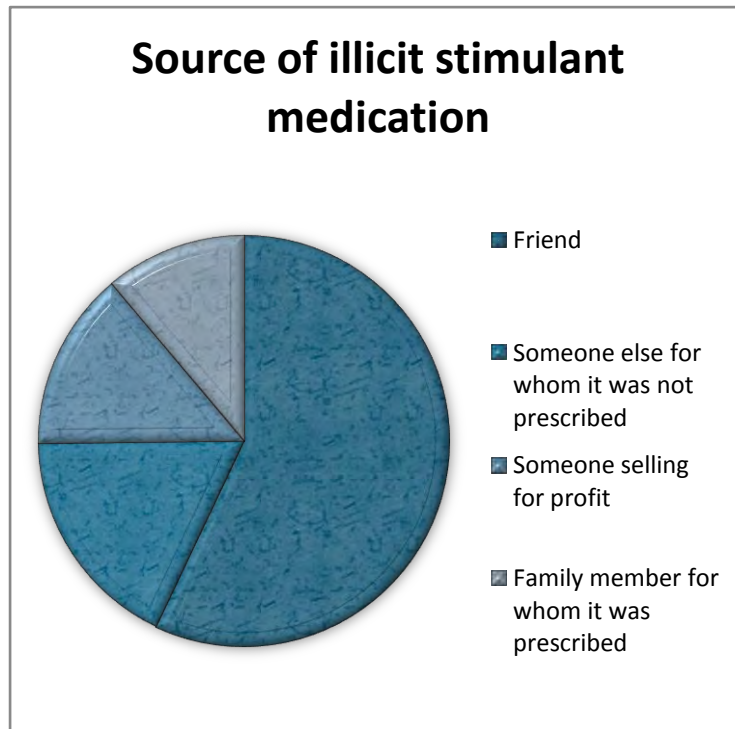


Assessment Project

Evaluation and Treatment of Attention Deficit Hyperactivity Disorder

Attention Deficit Disorder is commonly diagnosed in the pediatric population. It is increasingly recognized as an impediment to academic success in the adolescent and young adult population. The medications used to treat it have potential for abuse. Those medications are frequently used for recreational purposes by those to whom it has not been prescribed. Health Care Providers often find it difficult to make clinical decisions in such a way as to support those with a legitimate need while minimizing the risk of abuse. There has heretofore been no data about the frequency of abuse of stimulant medication among students at Ball State University, or the difficult students with ADHD face finding treatment for their condition.

This assessment focused on a survey sent to all enrolled on-campus students, in collaboration with a national study being conducted by Dr. Mark Thomas at the University of Alabama. 750 students responded to the survey. 41 of those students



reported a diagnosis of ADHD, and 24 students reported current treatment for their condition.

Of the 41 students diagnosed with ADHD, 6 reported having been asked to share their medication, and 3 reported having done so. 707 students reported never having been diagnosed with ADHD. Of those, 98 reported having taken a stimulant medication not prescribed for them.

Based on the survey results, it appears that either a very small number of students are serving as a source for a large number of students using stimulants illicitly, or there is a demographic outside of our college students which is serving as a source. It appears there is an opportunity to attempt to influence behavior by outreach to those students using stimulants without a prescription. This survey will serve as a baseline upon which to measure the success of such efforts. Comparative data with other schools including the University of Alabama and University of Virginia will be forthcoming.

HEALTH EDUCATION

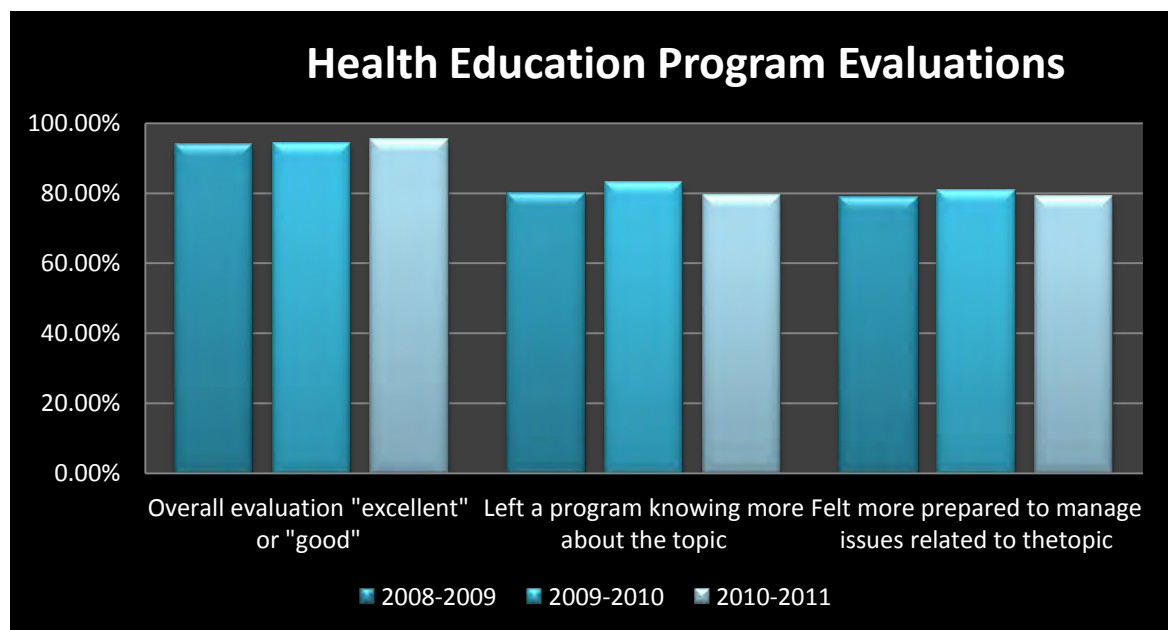
2010-2011

Outreach Programs

Outreach programs dealing with health-related issues such as sexual health, sexual responsibility, nutrition, sleep hygiene, and substance abuse are performed as requested by student organizations, resident advisors, and faculty/staff. In addition, groups offered through the Office of Health Education include a weight loss challenge, smoking cessation, court offenders, and marijuana education.

The total number of outreach programs conducted by Health Education in 2010-2011 was 250. This is down from the 283 programs conducted in 2009-2010. Health Education was without an Alcohol & Other Drug Coordinator from August to October 2010 due to medical leave. Although the total number of programs presented decreased, the total number of students reached through outreach programs rose dramatically from 7,182 students in 2009-2010 to 9,723 students in 2010-2011.

Evaluations of Health Education programs remained highly positive as shown in the chart below. On average, 79.5% of participants reported leaving a program knowing more about the topic. In addition, 79.2% of participants felt more prepared to manage issues related to the presentation topic. Moreover, 95.3% of participants reported their overall evaluation of a Health Education program as "excellent" or "good." This is up one percentage point from 2009-2010.



Party Smart BSU!

Health Education was awarded a \$2,244 grant from the Delaware County Coordinating Council to Prevent Alcohol and Other Drug Abuse for the Party Smart BSU! program in 2010. Party Smart BSU! is an alcohol education and awareness campaign to help Ball State University student's party responsibly without endangering themselves or anyone else. The kit includes tips on how to hold a successful smart party and be responsible when attending a party. Laminated cards inform the signs of alcohol poisoning and what to do if you suspect someone is experiencing alcohol poisoning. Brochures also discuss local laws on alcohol, minor consumption, and providing minors with drinks; and recipes for snacks and mocktails. A "Party Smart BSU!" t-shirt & beach ball, condoms, and a "Health Education" snack clip were also included.

Awarded
\$2,244 grant for
Party Smart
BSU! program

Two hundred Party Smart kits were handed out at two fall 2010 semester events: the Activities Fair and the Homecoming Bed Races. Students earned the Party Smart kits by answering correctly at least three questions related to alcohol use and/or partying smart.

Party Smart BSU! was refunded by the DCCC for the 2011-2012 academic year.

Welloween

Over 1,100 students, faculty, and staff attended Welloween on Thursday, October 28, 2010 in the Student Recreation and Wellness Center. Welloween addressed the seven Dimensions of Wellness (emotional, environmental, intellectual, occupational, physical, social, and spiritual) with 37 vendors from campus and the community present.



A wide-variety of preventative health screenings and tests (eye health, body fat, flexibility, blood pressure, blood sugar, skin damage, HIV) were all available for free in one convenient location for the Ball State University community.



Evaluation revealed that 70.9% participated in at least one health screening, 57.1% learned of a new health topic or issue, 80.7% planned to read educational material provided to them, and 52.7% planned to make one healthy lifestyle change after learning information at Welloween.

Assessment

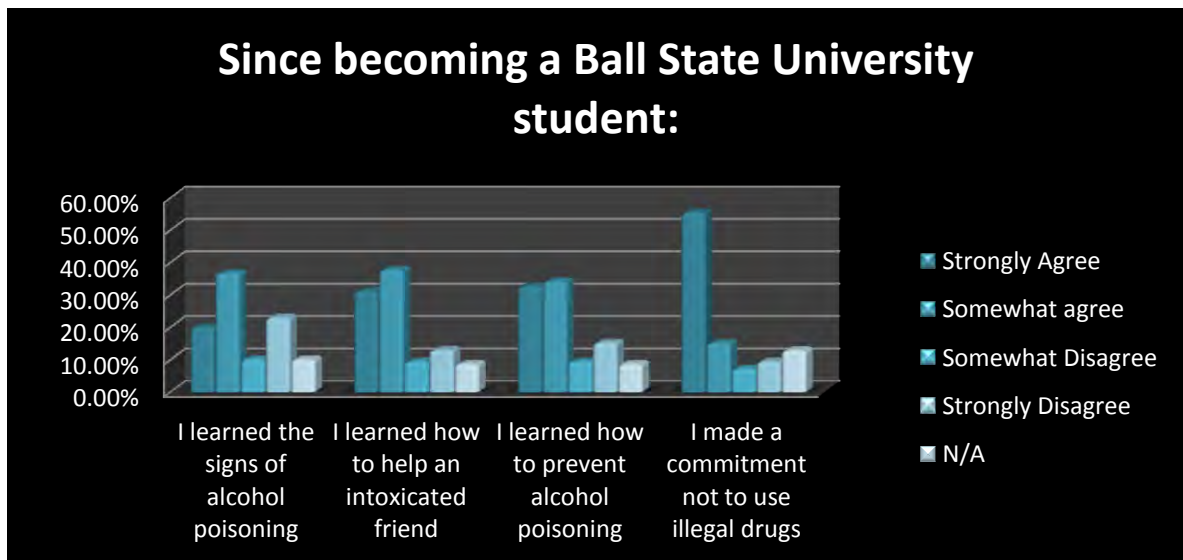
Health Education routinely evaluates outreach programs presented in the residence halls, classrooms, and to student organizations by means of the Scantron “Counseling Center and Health Education Outreach Program Evaluation”. Outreach programs are evaluated for clarity of content, relevance to attendant, presenter’s preparedness, and attendants’ knowledge about the topic and planned behavior change as a result of the program, etc. The Health Education Student Impact Survey was created to determine what campus-wide events were most popular this past academic year, where Health Education reaches the greatest amount of students, and what students have learned from our office since they came to Ball State. Freshmen were surveyed to create a base-line for future assessment projects.

Project Goals:

1. Assess Freshman attendance at Health Education campus-wide events.
2. Assess where students are attending Health Education programs.
3. Assess what students have learned about tobacco, alcohol & other drugs, safer sex, nutrition, physical activity, and stress since becoming a BSU student.

Key Findings:

1. Party Smart BSU! was the most attended campus-wide program among freshmen.
2. 50% of survey respondents had an outreach program presented to them in their residence hall.
3. 72% of respondents reported somewhat or strongly agreeing that they learned how to practice safer sex since becoming a Ball State University student.
4. 70.5% of respondents somewhat or strongly agreed they learned strategies for living a healthy and productive lifestyle.

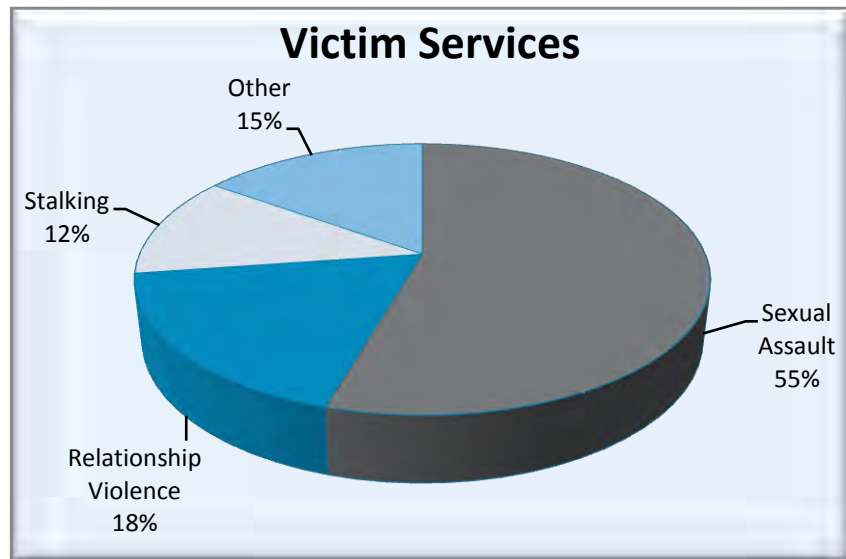


VICTIM SERVICES

2010-2011

Comprehensive Services

The Office of Victim Services provides comprehensive services to campus and community resources for students, faculty, and staff who have been victimized. This includes, but is not limited to physical and sexual assault, relationship violence, and stalking. The program is designed to assist individuals in the recovery process by providing timely information and confidential support and guidance through the campus judiciary and criminal justice systems. The pie chart reflects the percentage of clients served according to their victimization type.



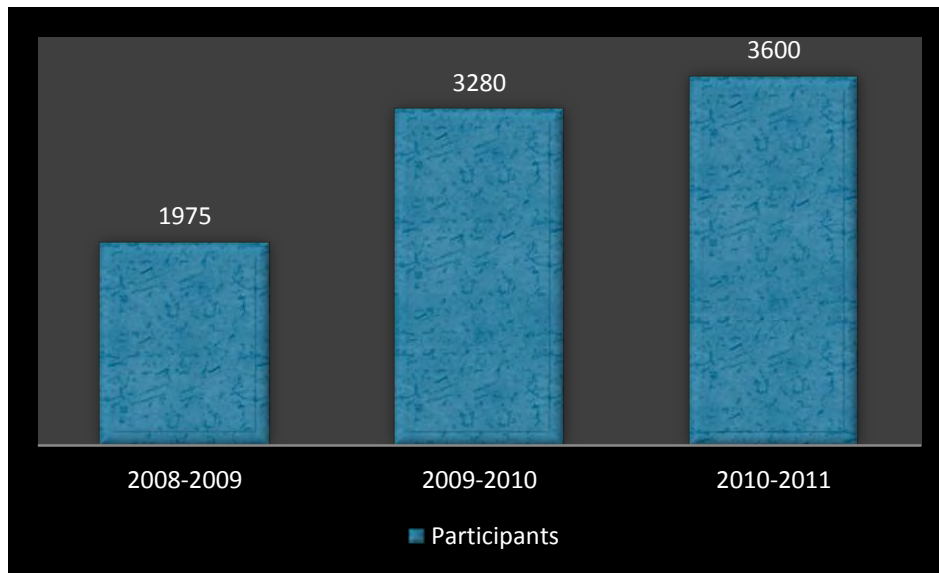
A total of 38 clients received 88 victim advocacy services from the Office of Victim Services. The Victim Advocate averages approximately two to three contacts per client.

External Funding Sources

The Office of Victim Services was able to solicit and receive several grants to improve violence prevention outreach initiatives on campus. Avon corporation chose our proposal from one of 23 programs selected from more than 100 applications from across the country. The grant will help enable our campus to improve the existing Peer Victim Advocate training and initiate additional outreach programs specifically focused on the dynamics of relationship violence.

Outreach Initiatives

The Office of Victim Services continued to increase outreach and violence prevention initiatives to improve students' education and awareness. The office focuses on three national awareness campaigns: April-Sexual Assault Awareness Month; October-Domestic Violence Awareness Month; and January-Stalking Awareness Month. A total of **70** events were conducted during these months, resulting in a total of **3,600** in attendance.



Experiential Learning

The Office of Victim Services provides a valuable learning experience to students who are interested in volunteering as Peer Victim Advocates. Currently, the team consists of 20 members who have completed 80 hours of training. The members volunteer a minimum of 20 hours of service each month by responding to IU Health Ball Memorial Hospital, conducting violence prevention outreach presentations to their peers, and attending monthly meetings and ongoing training sessions. The Peer Victim Advocacy training is comprised of a web based module, two seminars, a research paper and presentation, as well as criminal justice observation with the courts and police. Upon completion of their training, peer victim advocates provide advocacy services by responding after hours to IU Health Ball Memorial Hospital, as well as presenting violence prevention outreach programs to their peers.

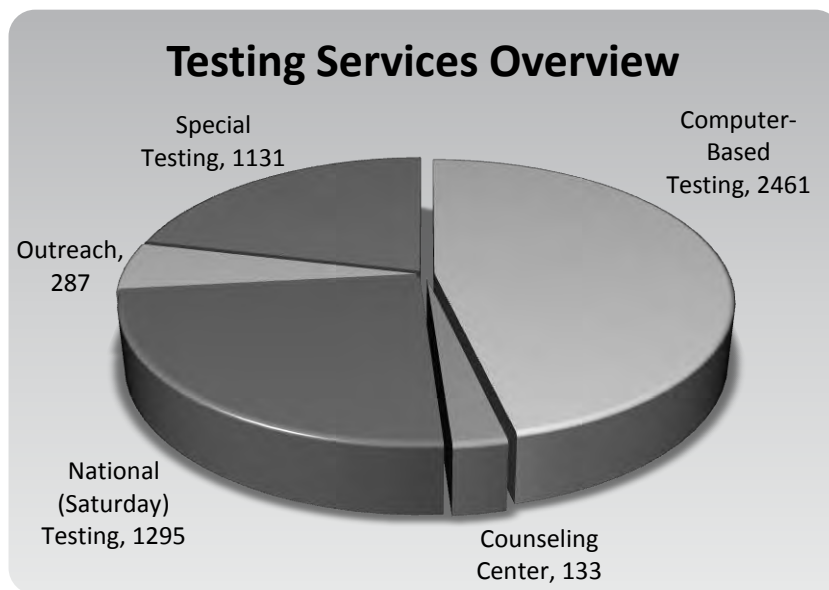


TESTING PROGRAMS

2010-2011

Testing Services

The computer-based testing program experienced a slight increase this year; from 2,113 in 2009-10 to 2,461 in 2010-11. The computer-based testing program continues to comprise 46% of all testing services provided by the Office of Testing Programs. The National (Saturday) testing programs remain steady with a slight decrease from 1,572 in 2009-10 to 1,295 in 2010-11 comprising 24% of all testing services. Both the computer-based and national testing programs are integral to our students for admission to graduate and professional schools/programs as well as teacher licensing. In all, 5,307 tests and assessments were administered to BSU students as well as individuals in the surrounding communities.



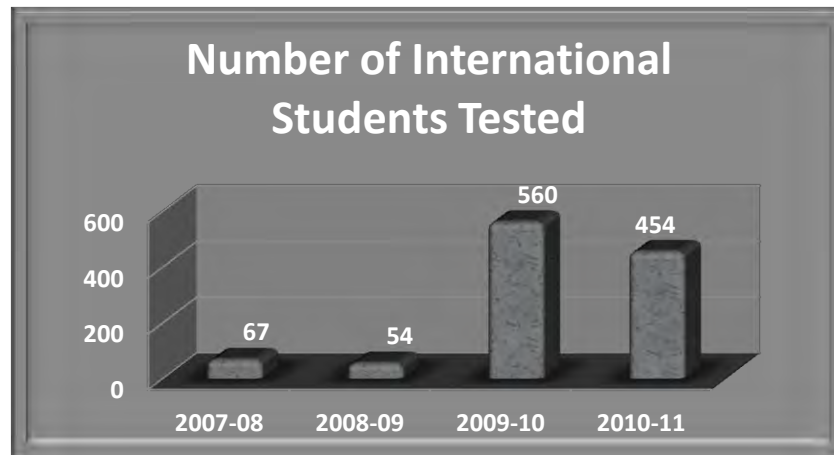
Outreach Testing Services

As part of the Counseling Center's outreach program, selected assessments are administered to students at the request of faculty members or course instructors. Instruments such as the Myers-Briggs Type Indicator are used as an adjunct to the outreach presentation.

In 2010-11, 287 students completed assessments as part of an outreach program; up from 221 students in 2009-10.

International Student Testing

The COMPASS placement assessments are administered by the Office of Testing Programs to the international student population as a measure of placement and proficiency in English. Efforts to increase international admission at Ball State have had a dramatic effect in terms of the number of students required to take these assessments. In 2010-11, 454 students were tested for placement and proficiency; down from 560 in 2009-10. This decline is most likely due to the discontinued use of the Institutional TOEFL (Test of English as a Foreign Language) as it had been utilized in the previous academic year.



Entrance Testing for the School of Nursing

During 2008-09, the Office of Testing Programs began administering assessments for the BSU School of Nursing. We continue to administer the PAX-RN assessment from the National League for Nursing to BSU students for admission to a nursing program. The PAX-RN is an entrance exam designed to measure aptitude, basic knowledge and learning potential.

*243 PAX-RN
exams were
administered in
2010-11*